

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本, 仅供参考. 为了提供便利, 表格采用双语格式, 但向法院提交的表格必须用英语填写。



CIRCUIT COURT
巡回法庭

DISTRICT COURT OF MARYLAND FOR
马里兰州地区法庭

City/County
城市/县

Located at
地址

Case No.
案件编号

Court Address
法院地址

REQUEST FOR ACCESS TO SHIELDED SECOND CHANCE ACT RECORD(S)

申请查阅再一次机会法案记录

(Criminal Procedure §§ 10-302(b) and 10-303)

(《刑事诉讼程序》第 10-302(b) 条和第 10-303 条)

I, the undersigned, request access to records shielded pursuant to Criminal Procedure Article §§ 10-302(b) and 10-303. In support of this request, I state that I am:

本人在此签名申请根据《刑事诉讼程序》第 10-302(b) 和第 10-303 条查阅被屏蔽的记录。为支持此项申请, 本人声明自己是:

- 1) a representative of a criminal justice unit and access is for legitimate criminal justice purposes
1) 刑事司法单位代表并且是出于合法的刑事司法目的进行查阅

Name and Address of Criminal Justice Unit
刑事司法单位的名称和地址

Telephone and E-mail of Criminal Justice Unit
刑事司法单位的电话和电子邮件

- 2) a prospective or current employer or government licensing agency subject to a statutory or regulatory requirement or authorization to inquire into the criminal background of an applicant or employee for purposes of carrying out that requirement or authorization
2) 受法定或监管要求或授权约束的未来或当前雇主或政府许可机构, 为执行该要求或授权而调查申请人或雇员的犯罪背景

Name and Address of Employer or Government Licensing Agency
雇主或政府许可机构的名称和地址

Telephone and E-mail of Employer or Government Licensing Agency
雇主或政府许可机构的电话和电子邮件

- 3) a person that is authorized or required to inquire into an individual's criminal background under § 5-561(b), (c), (d), (e), (f), or (g) of the Family Law Article;
3) 依据《家庭法》第 5-561(b)、(c)、(d)、(e)、(f) 或 (g) 条授权或要求某人对人员的犯罪背景进行调查;
- 4) the person who is the subject of the shielded record or that person's attorney;
4) 被屏蔽记录的当事人或其律师;
- 5) an employee or representative of a Health Occupations Board established under the Health Occupations Article;
5) 根据《健康职业条例》设立的健康职业委员会的员工或代表;
- 6) a member or agent of the Natalie M. LaPrade Medical Cannabis Commission established under Title 13, Subtitle 33 of the Health-General Article;
6) 根据《一般健康条例》第 13 条第 33 项设立的 Natalie M. LaPrade 医学大麻委员会的成员或代理;
- 7) a person who uses volunteers who care for or supervise children;
7) 让志愿者照料或监管孩子的人员;
- 8) a person who hereby attests under the penalty of perjury that the person employs or seeks to employ an individual to care for or supervise a minor or vulnerable adult, as defined in § 3-604 of the Criminal Law Article;
8) 根据《刑法》第 3-604 条的规定, 在此证明某人雇用或试图雇用个人照顾或监督未成年人或易受伤害的成年人, 并愿受做伪证惩罚和有员;

I hereby affirm under the penalties of perjury that I employ or seek to employ an individual to care for or supervise a minor or vulnerable adult, as defined in § 3-604 of the Criminal Law Article.

根据《刑法》第 3-604 条的规定, 本人在此确认雇用或试图雇用个人照顾或监督未成年人或易受伤害的成年人, 并愿受做伪证惩罚;

Date 日期	Signature 签名	
<input type="checkbox"/> 9) a person who is accessing a shielded record on behalf of and with written authorization from a person or governmental entity described in Items (1) through (8). 9) 代表并得到第 (1) 到 (8) 项中所述人员或政府实体书面授权来查阅被屏蔽记录的人员。		
Date 日期	Signature 签名	Attorney Number (律师编号)
Printed Name 正楷姓名	Telephone Number 电话号码	Cell Phone Number 手机号
Address 地址	Fax 传真	
City, State, Zip 城市、州、邮编	E-mail 电子邮件	

CERTIFICATE OF SERVICE

送达证明

I HEREBY CERTIFY that on _____, a copy of this Request for Access to Shielded Second Chance

Act Record(s) was served by hand delivery mailing first class mail, postage prepaid, to the following parties:

本人在此证实：_____ 这一“查阅再一次机会法案记录”申请的副本

已通过一类邮件邮寄(预付邮资) 亲手交付 给以下各方：

Name 姓名	Address 地址
Name 姓名	Address 地址
Date 日期	Signature 签名

RULING FOR ACCESS TO SHIELDED SECOND CHANCE ACT RECORD(S)

查阅再一次机会法案记录申请裁定

Upon consideration of the foregoing, access by the moving party (only) is hereby:

考虑到上述情况, 特此对以下当事方(仅限):

- Granted.
批准。
- Denied.
被否决。
- Set for Hearing.
安排听证会。

Date 日期	Judge 法官	ID Number 身份证号码
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