



Georgia Sheriffs' Association
CERTIFIED PROCESS SERVER APPLICATION

1. Name _____
(Last Name) (First Name) (Middle Initial)
2. Address _____
City _____ State _____ ZIP _____
3. Work Telephone () _____ 4. Alternate Telephone () _____
5. Date of Birth _____ 6. Race _____ 7. Gender _____
8. Email Address _____
9. Are you now, or have you even been, licensed to carry a firearm in this or any other state? ☐ Yes ☐ No
10. If yes to Question 9, for each indicate the state, the corresponding license number, and the issuance date
(attach additional sheets as necessary):

11. Are you appointed as a permanent process server pursuant to O.C.G.A. 9-11-4? *(If yes, please attach a list of all court appointments held as well as a contact name and number for each appointment)*
12. Have you been disciplined by any state, national, or federal licensing agency or authority which regulates any profession? ☐ Yes ☐ No *(If yes, please attached an explanation)*
13. Have you ever been convicted of, or have entered a plea of nolo contendere to, or been granted first offender treatment upon being charged with (1) any criminal offense other than a traffic violation or (2) any traffic violation that involved driving under the influence of alcohol or drugs, homicide or feticide by vehicle, fleeing the scene of an accident, attempting to elude a police officer, or impersonating a law enforcement officer?
☐ Yes ☐ No *(If yes, please attach an explanation)*

I hereby swear that all information I have provided on this application and any attached explanations and accompanying forms are true, complete, and correct. I understand that any information provided by me that the certifying sheriff or Georgia Sheriffs' Association finds to be false, incomplete, or misrepresented in any respect are grounds for denial of a certificate and, if discovered after certification, are grounds for disciplinary actions, up to and including prosecution and revocation of my certificate.

Signature _____ Date _____

Required Attachments:

- o Completed Certified Process Server Application
- o Documented proof of citizenship
- o Proof of completion of a fingerprint based criminal background check
- o Certificate of completion of 12 hour pre-certification training
- o Certificate of successful completion of certification exam
- o Copy of commercial surety bond
- o Electronic Photo Submission must be sent to GSA's Brent Loeffler at bloeffler@georgiasheriffs.org and Missy Sammons at msammons@georgiasheriffs.org
- o \$80 application fee (money order or cashier's check)

Vehicle Information

Make, model, color, and license plate number of all vehicles you use:

Make	Model	Color	License Plate

Do you possess a valid driver's license: ☐ Yes ☐ No

If yes:

State:
Class:
License Number:

Submit this application and all required attachments to the Sheriff of the county in which you desire to register