

FINGERPRINT BACKGROUND CHECK REQUEST AND CONSENT FORM

Purpose: To conduct a FBI or Civil fingerprint-based background check for employment, to volunteer, or for licensing purposes as authorized by law

I. Authorizing Information										
1. ORI	2. Department / Agency			3. Reason for Fingerprinting				2	4. U.S Citizen / PR	
5. E-mail Address for to receive status notifications					6. Requestor Agency Name 7. O				OCA / UCN / MNU - Number	
II. Applicant Information: Type or clearly print answers in all fields before going to be fingerprinted.										
1a. Last Name 1b.			1b. First Name			1c. Middle Init			al 1d. Suffix	
2. Alternative Name (Alias / AKA):Surname/ Last name, followed a Comma & Space, F & M name 3. Soci							ial Security Number (Optional)			
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4. Place of Birth (State or Country) 5. Date o		of Birth 6. Phon	th 6. Phone Number			7. Driver's License / State ID Nu			ber 8. Issuing State	
9. Home Address	10.	City					11. Stat	e	12. ZIP Code	
13. Sex 14. Rac	e 15. Height		16. Weight		17. Eye Color		Color	18. H		lair Color
III. Privacy Act Statement										

Authority: Acquisition, preservation, and exchange of fingerprints and associated information by the Federal Bureau of Investigation (FBI) is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application. **Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine Uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

IV Procedure to Obtain a Change, Correction, or Update of Identification Records

be compared against other fingerprints submitted to or retained by NGI.

If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections, or updating of the alleged deficiency; he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency. (28 CFR § 16.34).

V. Consent

I understand that my personal information, photograph FBI or DOJ card with biometric data being submitted by Electronically and or HardCard fingerprint via mail will be used to search against identification records from the State and or FBI CJIS for the purpose listed above. I hereby authorize the release of my personal information for such purposes and release of any records found to the authorized requesting agency listed above. I understand that the rejection due to poor fingerprint quality and or incorrect data entry -"NO REFUNDS". Signature:

Date:

Time: