



INFORMATION SHEET

TODAY'S DATE: _____

NAME OF APPLICANT:		DATE OF BIRTH:	
ADDRESS:			
CITY:		STATE:	ZIP CODE:
SOCIAL SECURITY: ____ - ____ - ____			
PHONE NUMBER: ____ - ____ - ____		EMAIL ADDRESS:	
APPLICANTS POSITION/TITLE		NAME OF SCHOOL/LOCATION	
<input checked="" type="checkbox"/> CHAPERONE/VOLUNTEER <input type="checkbox"/> TEACHER <input type="checkbox"/> PERMANENT EMPLOYEE <input type="checkbox"/> STUDENT INTERN <input type="checkbox"/> SUB/TEMP EMPLOYEE <input type="checkbox"/> VOLUNTEER COACH (NON-PAID) <input type="checkbox"/> PAID COACH <input checked="" type="checkbox"/> OUTDOOR EDUCATION		 	

OHRD OFFICE USE ONLY

CLEARANCE RETURN INFORMATION

ENTERED INTO ATS: _____ EMPLOYEE ID: _____
INITIAL/DATE

FINGERPRINT DATE	STATE	FBI	CJIS NUMBER	DATE REF TO DCI

Office of Human Resources and Development



STATE OF MARYLAND
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES
CRIMINAL JUSTICE INFORMATION SYSTEMS - CENTRAL REPOSITORY

LIVESCAN PRE-REGISTRATION APPLICATION

APPLICANT INFORMATION - PLEASE FILL IN ALL BOXES NEATLY!

LAST NAME:			FIRST:			MIDDLE:		
Date of Birth: (mm/dd/yyyy) / /			Social Security #:			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
Height: ft. inches		Weight: lbs		Hair Color:		Eye Color:		
Race: (Please check ONE) <input type="checkbox"/> Black <input type="checkbox"/> White/Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Other								
State of Birth or Foreign Country:					Where is your Citizenship:			
Current Address:								
						Apt:		
City:				State:		ZIP Code:		
Daytime Phone:			Evening Phone:			Driver's License #:		

REQUIRED INFORMATION

Please Circle **Yes** or **No** for Each Question-

Have you ever been charged or convicted of any criminal activity? YES NO

Do you have any pending criminal charges? YES NO

AGENCY INFORMATION

Agency Authorization#: 0000084571 (must be 10 Digits)	CCA# (Childcare only, if required) N/A
ORI # (if required): 004455Y	Reason fingerprinted? N/A
Potential Job Title(if applicable): N/A	

Request Type: <i>(Choose one ONLY)</i>	
<input type="checkbox"/> Adult Dependent Care	<input type="checkbox"/> Government Licensing or Certification
<input type="checkbox"/> Attorney/Client	<input type="checkbox"/> Immigration/VISA
<input checked="" type="checkbox"/> Child care	<input type="checkbox"/> Individual Challenge
<input type="checkbox"/> Criminal Justice	<input type="checkbox"/> Individual Review
<input type="checkbox"/> Gold Seal/ Adoption	<input type="checkbox"/> MSP Licensing
<input type="checkbox"/> Gold Seal/Letter/VISA	<input type="checkbox"/> Private Party Petition
<input type="checkbox"/> Government Employment	<input type="checkbox"/> Public Housing



MONTGOMERY COUNTY PUBLIC SCHOOLS

www.montgomeryschoolsmd.org

MARYLAND



Malcolm Baldrige
National Quality Award

2010 Award Recipient

AUTHORIZATION FOR CRIMINAL HISTORY RECORD INFORMATION

I, _____ (print full legal name), the undersigned, do hereby authorize the Montgomery County Public Schools (MCPS) to procure Criminal History Record Information (CHRI) from the State of Maryland and/or Federal Bureau of Investigation (FBI).

I further authorize any person, business, business entity, or governmental agency who may have information regarding my CHRI to disclose the same to MCPS, regardless of whether such person, business, business entity, or governmental agency compiled the information itself or received it from another source.

Finally, I understand that I have the opportunity to complete or challenge the accuracy of the FBI's CHRI, as set forth in Title 28, Code of Federal Regulations, § 16.34. I acknowledge that a copy of the procedures for obtaining a change, correction, or update was provided to me at the time of signing this authorization.

SIGNATURE

DATE

Office of Human Resources and Development

45 West Gude Drive, Suite 2100 ♦ Rockville, Maryland 20850 ♦ 301-279-3204

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.²
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 28 CFR 50.12(b).

⁴ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).



AMERICAN IDENTITY SOLUTIONS
 IDENTITY SOLUTIONS THROUGH BIOMETRIC DESIGN

INVOICING

Agency: Outdoor Education Overnight volunteers for Montgomery County Public Schools

Service requested: Child Care, (full background check), volunteers, customer will pay \$20.00 at the time of service.

Authorization number: 0000084571, request type "C"

Name: _____

School Name: _____

Appointment Date: _____

YP# (for AIS use only): _____

Payment Type Do not charge cc admin fee	Cash	Card	M/O	YP#
\$20.00				

AIS employees, please check box for payment, write the YP#, and file this form.

Our locations (please call or visit www.americanident.com to schedule an appointment):

- 7361 Calhoun Pl, Suite 485, Rockville, MD 20855, (301) 296-4499
(M-F 9am-5pm, 5pm-6pm appt only, Sat 9am-1pm appt only)
- 12501 Prosperity Dr, Suite 200, Silver Spring, MD 20904, (240) 670-7952
(M-F 9am-5pm)
- 6701 Democracy Blvd, Suite 110, Bethesda, MD 20817, (301) 571-9479
(M-F 9am-5pm)
- 12800 Middlebrook Rd, Suite 112-B, Germantown, MD 20874, (301) 383-9651
(M-F 9am-5pm)