DPS Computerized Criminal History (CCH) Verification

I, _____, have been notified that a computerized criminal
APPLICANT or EMPLOYEE NAME (Please print)
history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of $9.95 to the fingerprinting services company, L1Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by your agency. Required for future DPS Audits)

_____
Signature of Applicant or Employee

_____
Date

North Central Texas College
Agency Name (Please print)

Lynn Peters
Agency Representative Name (Please print)

_____
Signature of Agency Representative

_____
Date

Please:
Check and Initial each Applicable Space

CCH Report Printed:

YES _____ NO _____ _____ initial

Purpose of CCH: **Employment**

Hire _____ Not Hired _____ _____ initial

Date Printed:_____ _____ initial

Destroyed Date:_____ _____ initial

Retain in your files

CRIMINAL HISTORY/DRIVING RECORD
RELEASE FORM

North Central Texas College may conduct a criminal history record on prospective employees. Please TYPE or PRINT the information requested below and sign the release form.

*NAME:_____
Last First Middle

Current Address Street_____ Apartment # _____
City _____ State_____ Zip _____

*Driver's License # _____ State _____ Exp Date _____

* Date of Birth _____ *Social Security # _____

I hereby authorize North Central Texas College to conduct a criminal history check.

_____ _____
Signature Date

Requested By _____

Criminal History Results
Date _____
Initials _____

Driving Record Results
Date _____
Initials _____