

CRIMINAL HISTORY RECORD INFORMATION REQUEST

Confidential *

The Franklin Independent School District is required by state law to review the criminal history of applicants, employees, student teachers, and volunteers. The information requested below is necessary to obtain criminal history record information.

Please print

Name: *Last* _____ *First* _____ *Middle* _____

Date of birth _____

Sex: Male Female

Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)

- Hispanic/Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or Other Spanish culture or origin, regardless of race.
- Not Hispanic/Latino**

Part 2. Race What is the person's race? (Choose one or more)

- American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand, and Vietnam.
- Black or African American** – A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment but will be used *solely* for the purpose of obtaining criminal history record information.

Signature

Date

* This form will be removed from the application and filed separately in the HR office.

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

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 that 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 conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

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 make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company, L1 Enrollment 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)

For Agency Use Only:

Signature of Applicant or Employee

Date

Franklin Independent School District
Agency Name (Please print)

Rhonda Payne
Agency Representative Name (Please print)

Signature of Agency Representative

Date

Please: Check and Initial Each Applicable Space	
CCH Report Printed:	
YES <input type="checkbox"/>	NO <input type="checkbox"/> _____ Initial
Purpose of CCH: _____	
Hire <input type="checkbox"/>	Not Hired <input type="checkbox"/> _____ Initial
Date Printed: _____	_____ Initial
Destroyed Date: _____	_____ Initial
Retain in your files	