

BACKGROUND CHECK PROCEDURE DIGITAL FINGERPRINT PACKET – FORM A

Each applicant **must** complete and sign the attached Kentucky State Police (KSP) application, **FORM-A ‘Request For Conviction Records/Nonpublic Schools’**, acknowledging that he or she is aware of the FBI Criminal Record Check. A witness signature **must** be included on this application. School personnel can be considered a witness. This procedure page is the front cover of the packet.

- 1) School personnel will give the applicant a packet containing the information listed below.
 - KSP FORM-A ‘Request For Conviction Records/Nonpublic Schools’ application form.
- 2) **School personnel will have the applicant, in their presence; complete the KSP FORM-A ‘Request For Conviction Records/Nonpublic Schools’.** A **completed copy of this form MUST** be sent to the Risk Management Office. *Remember a witness must sign the application.* The school / organization is the **Diocese of Lexington**.
- 3) The applicant may go for digital fingerprints to one of the two locations as listed below.
 - A. The (CDL) Commercial Driver’s License site in Lexington. The applicant will call 1-888-655-9655 to make the appointment. The site location is 162 East Main Street, Room 201, Lexington KY 40507.
 - B. The AFIS office in Frankfort, Kentucky. The applicant may go to this office to be fingerprinted, no appointment is necessary. Hours of operation are 8 a.m. to 4:30 p.m. Monday through Friday. Special times outside of this window must be pre-arranged by calling 1-502-227-8700, ask for the AFIS section. This office location is 1250 Louisville Road, Frankfort KY, 40601.
- 4) The applicant **must** take with them the completed FORM-A and his / her driver’s license or another form of identification. **When you arrive at the site it is very important to inform the onsite staff that you are here to be fingerprinted for the Diocese of Lexington Catholic Schools.**
- 5) **The applicant does not pay for the Fingerprint Background Check process at these locations.** The Diocese of Lexington Catholic Schools Office has an account with the KSP. This account is charged a standard processing fee, as determined by the KSP, for the processed Background Check. The Catholic Schools Office will bill the applicant’s school for the related fee for the processing of the background check.
- 6) The completed Background Check Report is received at the Catholic Schools Office via the U.S. Mail and becomes the property of the Catholic Schools Office. The Superintendent of Schools reviews this report and will notify the school principal of any abnormalities.



REQUEST FOR CONVICTION RECORDS/ NONPUBLIC SCHOOLS

Pursuant to KRS 160.151, request is made for any criminal record found in the files of the Kentucky centralized criminal history record information system regarding the person identified herein. This information shall be released to:

Diocese of Lexington, 1310 W Main St., Lexington KY 40508

School Name and Address

KRS 160.151/Certified Teacher

KY920180Z

KSP-PRIV SCHOOL PROG

FRANKFORT, KY

ACKNOWLEDGMENT BY APPLICANT

I have applied for a position as a certified employee or student teacher with the above named nonpublic school. I hereby request that the Kentucky State Police inform the above named school of any criminal record found in the files of the Kentucky centralized criminal history record information system. I also understand and request that the KSP conduct a nationwide criminal records check through the FBI and based upon the results of that check, inform my employer/prospective employer whether or not I have a criminal record. I know that I have the right to inspect my Kentucky criminal history record and to request correction of any inaccurate information contained therein. If I do not exercise that right, I agree to hold harmless the KSP and any KSP employee from any claim for damages arising from the dissemination of inaccurate information.

APPLICANT INFORMATION (PLEASE PRINT)

NAME: _____
 First Middle Last Maiden

ADDRESS: _____
 Street City State Zip

SEX: _____ RACE: _____ DATE OF BIRTH: _____ SOC SEC NO: _____

 Signature Date Witness Date

INSTRUCTIONS:

Requesting schools should ensure that all application information is completed.

Requesting agencies should forward a check or money order made payable to the **Kentucky State Treasurer** in the amount of **\$39.25** for each submitted form. Requests should be accompanied by **two, self-addressed stamped envelopes** – one bearing the name and address of the requesting agency and the other bearing the name and address of the applicant.

The Kentucky State Police will charge a \$25.00 fee on each returned check.

RETURN THIS FORM TO:

Kentucky State Police
 Criminal Identifications and Records Branch
 Criminal Records Dissemination Section
 1250 Louisville Road
 Frankfort, KY 40601

The \$39.25 fee will be apportioned as follows: \$20.00 to the Kentucky State Police and \$19.25 to the Federal Bureau of Investigation

Visit us online @ <http://kentuckystatepolice.org>