

BACKGROUND CHECK PROCEDURE
ADMINISTRATIVE OFFICE OF THE COURTS
FORM C

This is a free, no fee charged, limited type of background check performed through the Administrative Office of the Courts (AOC).

- 1) The applicant completes and signs the application **FORM-C ‘Youth Leader Request’**. (See Miscellaneous Forms section of the Administrators Handbook)

- 2) The school mails the completed application to the address on the form.

- 3) The result report will be returned to the school. The school is responsible for keeping the reports. All received reports are to be placed in a single file located in the school office.



Kentucky Court of Justice
www.kycourts.net

Youth Leader Request

AOC-PT-55, Rev. 11-03

Mail Requests To:

Records Division
Pretrial Services
Administrative Office of the Courts
100 Millcreek Park
Frankfort, Kentucky 40601
502-573-1682 or 800-928-6381

Youth Leader Information

To request a record on an individual from the CourtNet Disposition System for the purpose of obtaining a background check, please follow these steps:

- Send this completed form to the mailing address above.
- Enclose a stamped envelope addressed to you for your return reply.
- Enclose a #10 (business-size) envelope addressed to the individual being checked.
- If you prefer, provide e-mail addresses for you and the individual being checked in place of envelopes.

Failure to comply with these procedures will result in the request being returned unprocessed. If you have any questions once you receive a reply, or if you suspect the information contained in the record is incorrect, contact Pretrial Services at 502-573-1682 or 800-928-6381.

Information on Individual Whose Record is Being Checked (please type or print clearly):

Social Security # _____

Name _____

Date of Birth _____

Maiden or Alias Names _____

Street Address/P.O. Box _____

City, State, ZIP _____

E-mail Address _____

I understand that failure to accurately provide the information requested may result in my prosecution under KRS 523.100. I have provided the basic information necessary to qualify for record processing.

Name of Agency

Address of Agency

Requestor/Contact Person

City, State, ZIP

Date

Phone #

E-mail Address