



DEPARTMENT of CHILDREN and FAMILIES

Making a Difference for Children, Families and Communities



BACKGROUND INFORMATION SHEET

Employee [] Contractor [] Intern [] Volunteer [] Other []

Name: _____
Last Name First Name Middle Name (spell out)

Maiden Name (if applicable): _____

Have you ever been known by another name (include aliases, legal name changes, etc.)

[] YES [] NO If yes, list the name and the reason below:

Classification/Job Title: _____ Work Location: _____

Email: _____

Home Address: _____
Street City/Town State Zip

Previous Address: _____
Street City/Town State Zip

Date of Birth: ____/____/____ Place of Birth: _____
MM DD YY City/Town State

Social Security Number: ____/____/____ Sex: M [] F [] Citizenship: Y [] N []

Race: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Do you have a valid driver's license? Yes [] No [] Operator Number: _____

State Issued: _____ Has your license ever been REVOKED or SUSPENDED? Yes [] No []

If Yes, please indicate whether REVOKED or SUSPENDED and state reason:

If REINSTATED, list date of reinstatement: _____

OVER

HAVE YOU EVER BEEN **CONVICTED** FOR AN OFFENSE AGAINST CRIMINAL OR MILITARY LAW, FORFEITED BOND, AND/OR ARE THE CRIMINAL CHARGES CURRENTLY PENDING AGAINST YOU? YES NO

Special Note: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46-b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a).

IMPORTANT QUALIFICATION: If you have a charge which has been resolved without a conviction, it must be disclosed herein if the matter has not gone to final disposition and your record has not been expunged. Examples include, but are not limited to, a “nolle” (which remains pending for 13 months) and accelerated rehabilitation (which remains pending until all court imposed conditions have been satisfied and the matter is formally dismissed by a judge). It is your responsibility to ensure that any charges not disclosed herein have, in fact, been erased from your criminal history record.

If **YES**, please attach a detailed explanation of the circumstances

DATE	PLACE	COURT LOCATION	OFFENSE(S)	DISPOSITION

The information I have given above is true, accurate and complete to the best of my knowledge. I understand any false, inaccurate, misleading or incomplete answer may result in a rescinded offer of employment or disciplinary action including termination from State service.

Signature of applicant/employee

Date signed

Signature of volunteer/intern

Date signed

NOTE: Fingerprints taken by the Department of Children and Families will be submitted to the Connecticut State Police and the FBI for a criminal history check.

I, <i>(Applicant Name)</i> : _____ do hereby authorize the Department of Children and Families to research its records to determine whether or not I am on the <i>me</i> central registry of persons responsible for child abuse and neglect I understand that this information may be used to determine my suitability solely for <i>(check one)</i> : <input type="checkbox"/> Employment <input type="checkbox"/> Day Care <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Mentor <input type="checkbox"/> Other: _____	<i>(This area for DCF Use only)</i> Date Processed: _____ Central Registry: <input type="checkbox"/> YES <input type="checkbox"/> NO Processor's Initials: _____
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Name of Agency <i>(requesting background check)</i> :	Attention:		
Address: (No. and Street):	City:	State:	Zip:

I release the Department of Children and Families from any liability for any damages I may incur which may result from the release / use of this information.
 I submit my following information to assist the Department of Children and Families in their search.

Applicant Last Name	Applicant First Name:	Middle:	DOB:	SS:
Applicant Address: (No. and Street):	Apartment #:	City:	State:	Zip:
Years at current address?" Years Months				

List All Previous Applicant Address(es) for the Last Five Years <input type="checkbox"/> <i>Check if an additional sheet is necessary, and attached</i>							
Address: (No. and Street):	Apartment #:	City:	State:	Zip:	Dates From:	Dates To:	
					Month Year	Month Year	

Other Names I have Used – <i>Including Maiden, Previous Marriages(s)</i> <input type="checkbox"/> <i>Check if an additional sheet is necessary and attached</i>							
Last Name	First Name:	Middle:	DOB:	SS:			

Name of Spouses/Other Adults in the Home – <i>Past and Present</i> <input type="checkbox"/> <i>Check if an additional sheet is necessary and attached</i>					
Last Name	First Name:	Middle:	DOB:	Signature (if still in the home)	Date:

Names of ALL Child(ren) – <i>Biological, Stepchildren, Including Adult Children In or Out of the Home</i> <input type="checkbox"/> <i>Check if an additional sheet is necessary and attached</i>				
Last Name	First Name:	Middle:	DOB:	Gender:

Do you have an active DCF investigation at this time? Yes No Do you have an active appeal of a DCF investigation at this time? Yes No

Applicant Signature:	Date:
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This authorization will expire 180 days after the date of the signature. Forms not filled out completely and / or clearly will be returned. Do not leave any blank spaces. Please specify with "N/A" if not applicable. ****DCF Conducts a Search of the CT Registry ONLY**** The Accuracy of this Search is Limited to the Information Provided by the Applicant to DCF.

How To Submit: Email: DCF.BackgroundCheck@ct.gov | Fax: 860-560-7071 | Mail: DCF-Background Check Unit, 505 Hudson Street, Hartford, CT 06106

Please be advised that due to the large volume of forms received, we are unable to provide confirmation of receipt or status updates during the background check process. If, after 4 weeks, you do not receive the results of any form(s) you sent in or if you have any questions, please contact the BGC Unit.



STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
Division of State Police

National Child Protection Act/Volunteers for Children Act
Waiver and Consent Form for
Department of Children and Families

The criminal history record checks performed under the National Child Protection Act (NCPA), as amended by the Volunteers for Children Act (VCA), will determine if you, as a care provider (current or prospective employee, volunteer, contractor/vendor, or owner/operator), have been convicted of crimes that bear upon your fitness to be responsible for the safety and well-being of children (persons less than 18 years old), the elderly (persons 60 years of age or older), or individuals with disabilities (persons with a mental or physical impairment who require assistance to perform one or more daily living tasks). Pursuant to the NCPA/VCA, this form must be completed and signed by every current or prospective provider for whom criminal history records are requested by a **Governmental Qualified Entity (QE)** or Department of Children and Families (DCF) Office. QEs/DCF provides care, treatment, education, training, instruction, supervision, recreation, care placement services, or licenses/certifies others who provide care to, vulnerable populations (children, the elderly, or individuals with disabilities).

Requesting QE/DCF Information:

QE/DCF Name	Department of Children and Families
QE/DCF Address	505 Hudson Street, Hartford, CT. 06106
QE/DCF Telephone Number	860-723-7292

I am a current or prospective (check one): Employee Volunteer Contractor/Vendor Owner/Operator
 Foster Care Applicant Adoption Applicant

I have been convicted of or pled guilty to a crime. No Yes*

*If yes, please provide a description of the crime and the particulars of the conviction on the back of this waiver.

I hereby authorize the requesting QE/DCF to submit a set of my fingerprints to the Connecticut State Police Bureau of Identification (SPBI) and Federal Bureau of Investigation (FBI) for the purpose of accessing and reviewing state and national criminal history records that may pertain to me. I further understand the following:

- My fingerprints will be used to check the criminal history records of the SPBI and the FBI;
- I can receive a state criminal history record from the SPBI and a national criminal history record from the FBI pursuant to Title 28, Code of Federal Regulations, §16.30-16.34;
- I am entitled to challenge the accuracy and completeness of any information contained in such records;
- The QE/DCF may choose to deny me unsupervised access to persons to whom the QE/DCF provides care until the criminal history record check is completed; and
- I may obtain a prompt determination as to the validity of my challenge before a final decision is made.

By signing this Waiver, it is my intent to authorize the dissemination of any state or national criminal history record which may pertain to me, to the requesting QE/DCF. I have read and understood the foregoing and the information provided is true and accurate to the best of my knowledge and belief.

*Printed Name: _____ Signature: _____

*Date of Birth: _____ *Address: _____

*as it appears on a valid identification document issued by a governmental agency

NOTE: The original waiver must be retained by the QE/DCF in the provider's case file.



Joette Katz
Commissioner

DEPARTMENT of CHILDREN and FAMILIES
Making a Difference for Children, Families and Communities



Dannel P. Malloy
Governor

I, _____, have received a copy of
the Privacy Requirements for Noncriminal Justice Applicants and the Federal
Bureau of Investigation Privacy Act Statement.

Printed Name

Signature

Date

NOTICE TO PERSONS BEING FINGERPRINTED BY
THE CONNECTICUT DEPARTMENT OF CHILDREN AND FAMILIES

Privacy Requirements for Noncriminal Justice Applicants

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 a job or license, an immigration or naturalization matter, security clearance, foster care or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ by the Connecticut Department of Children and Families that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, 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 updating 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 job, license, or other benefit based on information in the criminal history record.²
- 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.³
- 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 <http://www.fbi.gov/about-us/cjis/background-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 at the same address as provided above. 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.)
- If you need additional information or assistance, please contact:

<p>Connecticut Records: Department of Emergency Services and Public Protection State Police Bureau of Identification (SPBI) 1111 Country Club Road Middletown, CT 06457 860-685-8480</p>	<p>Out-of-State Records: Agency of Record OR FBI CJIS Division-Summary Request 1000 Custer Hollow Road Clarksburg, West Virginia 26306</p>
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¹ Written notification includes electronic notification, but excludes oral notification.

² See 28 CFR 50.12(b).

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

IMPORTANT NOTICE TO PERSONS BEING FINGERPRINTED BY
THE CONNECTICUT DEPARTMENT OF CHILDREN AND FAMILIES

Federal Bureau of Investigation
United States Department of Justice
Privacy Act Statement

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any systems(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

Agency Privacy Requirements for Noncriminal Justice Applicants

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as a job or license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notice and other information and that the results of the check are handled in a manner that protects the applicant's privacy.

- Officials must provide to the applicant written notice¹ that his/her fingerprints will be used to check the criminal history records of the FBI.
- Officials using the FBI criminal history record (if one exists) to make a determination of the applicant's suitability for the job, license, or other benefit must provide the applicant the opportunity to complete or challenge the accuracy of the information in the record.
- Officials must advise the applicant that procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- Officials should not deny the job, license, or other benefit based on information in the criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the criminal history record solely for the purpose requested and cannot disseminate the record outside the receiving department, related agency, or other authorized entity.²

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant notice, what constitutes "a reasonable time" for the applicant to correct or complete the record, and any applicant appeal process that is afforded the applicant. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of criminal history records for noncriminal justice purposes.

If you need additional information or assistance, contact:

Connecticut Records: Department of Emergency Services and Public Protection State Police Bureau of Identification (SPBI) 1111 Country Club Road Middletown, CT 06457 860-685-8480	Out-of-State Records: Agency of Record OR FBI CJIS Division-Summary Request 1000 Custer Hollow Road Clarksburg, West Virginia 26306
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¹ Written notification includes electronic notification, but excludes oral notification.

² See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.71(e), 20.53(d), 50.12(b) and 906.2(d).