

Child Care Fingerprint Criminal History Check Application

Neb. Rev. Stat. §71-1912 requires all child care staff members and individuals residing in a child care home who are 18 years of age or older to submit criminal history background checks. This application must be completed for each required individual. Failure to complete this application in its entirety or inaccurately will result in delayed eligibility results.

Page 1:

Completed by all child care staff members, license exempt staff members, college students, and household members who are 18 years of age or older applying for a Criminal History Check.

Legal Name: _____
 Last First Middle Initial

Date of Birth
 (MM/DD/YYYY): _____

ALL Previous Names: _____
 aliases maiden name name change)

****HAVE YOU BEEN MADE ELIGIBLE UNDER A DIFFERENT NAME** No Yes _____

Address: _____ City/State/Zip Code _____

Phone Number: _____ Email Address: _____
 *For fastest outcomes, eligibility results can be provided via email.

*****Please read the entire question before answering yes or no*****

	Yes	No
1. Are you a child care staff member, license exempt staff member, college student or household member, who has <u>NEVER been made eligible</u> (received an eligibility letter) and/or <u>NEVER been fingerprinted for child care</u> to work or reside in child care? <i>If YES to #1, continue to #5. You MUST get fingerprinted. If NO to #1, continue to #2.</i>	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you been fingerprinted and previously determined eligible to work or reside in a child care, but have <u>NOT worked or resided in a child care for 180 days or more?</u> <i>If YES to #2, Continue to #5. You MUST complete the fingerprinting process again. Children's Service Licensing will NOT distribute your previous eligibility status results to the child care listed below. If NO to #2, continue to #3.</i>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you a child care staff member, license exempt staff member, college student, or household member and <u>already ELIGIBLE</u> (you have received an eligibility letter in the past) to work or reside in a child care? <i>If YES to #3, Continue to #5. The eligibility letter will be sent to the child care listed on Page 2 of this application. If NO to #3, sign and date Page 1 of this application and have your employer move to Page 2.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4. INELIGIBLE – Were you determined ineligible to work or reside in child care and would like your background check reviewed again? <i>If YES, you MUST be past the 30-day ineligibility appeal request timeframe. You must complete the fingerprinting process again and have your employer move to Page 2.</i>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you lived outside of Nebraska in the last 5 years? If YES, which states? _____ <i>If YES to #5, you will be required to complete additional documents to request criminal records and child and adult abuse registry checks from the above listed state(s). The Department will make these request documents available to you. Sign and date Page 1 of this application and have your employer move to Page 2.</i>	<input type="checkbox"/>	<input type="checkbox"/>

I give consent for Children's Services Licensing to check a National Criminal History Record Information Check as well as Nebraska and out-of-state fingerprint and non-fingerprint-based registries and databases and provide my employment eligibility status to the identified child care program on Page 2. I also acknowledge that I have received the Privacy Act Statement and Noncriminal Justice Applicant's Privacy Rights disclosures as required by Federal law found at the end of this application.

Signature: _____ **Date:** _____

For Children's Services Licensing Use Only

NDEN ____ APS/CPS ____ Sex Offender ____ Date Checked ____/____/____ Out of State? Yes ____ No ____

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Page 2: Completed by the Director/Owner/License Exempt Providers of the Child Care Program		
Is your child care program LICENSED ?	<input type="checkbox"/> Yes License Number: _____	<input type="checkbox"/> No ONLY applies to new applicants PENDING a License Number OR College students
Is your child care program license PENDING ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your child care program LICENSE EXEMPT ? <i>License Exempt means: Providers not subject to state licensure, caring for children in the provider's own home (not including their own children) or in the home of the child; regulated by Child Care Subsidy.</i>	<input type="checkbox"/> Yes Subsidy Org or ID Number: _____	<input type="checkbox"/> No
Is your child care program PENDING a LICENSE EXEMPT number?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Child Care Program Name/License Exempt Program/College Program: _____ Address: _____ Phone Number: _____ Child Care Program Email: _____ *For fastest outcomes, eligibility results can be provided via program's email.		
Instructions for Child Care Program	<ol style="list-style-type: none"> 1. Child care staff member/License Exempt Staff Member/College Students/Household Members complete Page 1 and Child Care Program/License Exempt Program/College Program complete Page 2 of this application. 2. Send this application to: DHHS.ChildCareLicensing@nebraska.gov OR DHHS Licensure Unit Children's Services Licensing PO Box 94986 Lincoln NE 68509-4986 If this application is NOT sent to Children's Services Licensing, a background check cannot be processed by the Nebraska State Patrol. 3. Complete the fingerprinting process with the Nebraska State Patrol https://statepatrol.nebraska.gov/services/fingerprinting OR If the location is not a Nebraska State Patrol Troop location, you must submit fingerprints to the following address: Nebraska State Patrol-Criminal Identification Division 4600 Innovation Dr Lincoln NE 68521 4. If a fee is required, payment must be made to Nebraska State Patrol. If payment is NOT made, background checks will not be processed. 5. A letter will be emailed to the email address(es) provided by the child care program and/or the applicant. The child care program is responsible for keeping a copy readily available. 	
<i>I acknowledge that I understand the instructions above and attest the information provided by the applicant is true and accurate to the extent of my knowledge.</i>		
Owner/Director Signature: _____ Date: _____		

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Privacy Act Statement (as of 3/30/2018):

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 regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

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 nongovernmental 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.

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NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

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 employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- 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 employment, license, or other benefit based on information in the FBI criminal history record.
- 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 <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- 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 by submitting a request via <https://www.edo.cjis.gov>. 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.)
- 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

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).