## TEXAS DEPARTMENT OF PUBLIC SAFETY BACKGROUND CHECK CONSULTANT/CONTRACTOR/VENDOR SUBMIT TO HUMAN RESOURCES FOR APPROVAL

Name of Individual:		
Company:		
Type of Service:		
Event:		
Campus:		
Exact Date(s) of Ever	nt:	<del></del>
Contact Number(s):		
Copy o	of Valid Driver's License must be s	<mark>ubmitted</mark>
Will individual have DIRECT contact w	vith students? Yes $\square$ No $\square$	
Has individual ever been fingerprinte	d and entered into the TX DPS FACT Clearin	ghouse? Yes □ No □
Has the DPS Computerized Criminal F	History (CCH) Verification form been signed	& attached? Yes $\square$ No $\square$
ast four digits of social security num	ber:	
CAMPUS/DEPARTMNENT ONLY		
Requested by:		
(Signature)		(E-mail address)
	0.711	
Date) (Print Name	& litle)	(Campus/Department)
HUMAN RESOURCES ONLY		
Name Based □ Subs	cription $\square$	
SID:	Subscribed until:	
Ву:	Date:	
Approved: Yes □ No □		
Approved by:		_

## **DPS Computerized Criminal History (CCH) Verification**

(AGENCY COPY)

(AGENCI COFI)
I,, acknowledge that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)
History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure
Website and may be based on <u>name and DOB</u> identifiers. (This is not a consent form, but serves as
information for the applicant.) Authority for this agency to access an individual's criminal history data
may be found in Texas Government Code 411; Subchapter F.
Name-based information is not an exact search and only fingerprint record searches represent
true identification to criminal history record information (CHRI), therefore the organization conducting
the criminal history check is not allowed to discuss with me any CHRI obtained using the name and
<u>DOB</u> method. The agency may request that I also have a fingerprint search performed to clear any
misidentification based on the result of the <u>name and DOB</u> search.
In order to complete the fingerprint process I must make an appointment with the Fingerprint
Applicant Services of Texas (FAST) as instructed online at www.txdps.state.tx.us /Crime
Records/Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-467-2080
submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay
a fee of \$25.00 to the fingerprinting services company.
Once this process is completed the information on my fingerprint criminal history record may be
discussed with me.
(This copy must remain on file by this agency. Required for future DPS Audits)
Signature of Applicant or Employee (optional)
Please: Check and Initial each Applicable Space
Date CCH Report Printed:
Agency Name (Please print) YES NO initial
Purpose of CCH:
Agency Representative Name (Please print) Empl Vol/Contractor initial
Date Printed: initial
Signature of Agency Representative  Destroyed Date: initial
Retain in your files

Date