

**Applicants please note:** Completing this form does not automatically generate the need for a criminal history verification. This verification will not be conducted until the applicant is being seriously considered for employment. An applicant's criminal history does not automatically exclude them from employment; each situation will be reviewed carefully for consideration prior to a final offer of employment. All information is kept at the highest levels of confidentiality and is not included in an employee's personnel file.

**DPS Computerized Criminal History (CCH) Verification  
(Agency Copy)**

I, \_\_\_\_\_, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on Name and date of birth (DOB) information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method. This agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process, I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process, I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by NTCC. Required for future DPS Audits.)

\_\_\_\_\_  
Signature of Applicant or Employee

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Today's date

\_\_\_\_\_  
Agency Name

\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

<b>Please:</b>	
<b>Check and initial each Applicable Space</b>	
<b>CCH Report printed:</b>	
Yes _____ No _____	_____ Initial
Purpose of CCH: _____	
Hire _____ Not hired _____	_____ Initial
Date printed: _____	_____ Initial
Destroyed Date: _____	_____ Initial
<b>Retain in your files</b>	