

Elsie Arntzen, State Superintendent Montana Office of Public Instruction

How to Initiate Your Fingerprint Background Check

- Go to your local law enforcement agency or any other agency offering fingerprinting services. Request that your fingerprints be taken for a background check. There may be a charge for this service. Fingerprints must be clear. Smudged or unclear prints will be rejected. Therefore, we recommend that you complete two fingerprint cards to ensure that your background check can be completed in a timely manner.
- 2. Fill out appropriate sections of the fingerprint card(s) with your personal information. Complete the Employer and Address, Reason Fingerprinted and ORI sections as instructed in the box below:

Employer and Address:	Montana Office of Public Instruction
	Educator Licensure Division
	PO Box 202501
	Helena, MT 59620-2501
Reason Fingerprinted:	Montana Educator Licensure
	ARM 10.57.201A
ORI:	MT025025Y
	DOJ-ST ID BUR
	Helena, MT

3. Do not fold the completed fingerprint cards. Mail the completed fingerprint cards along with a check for \$27.25 (after Feb 28, 2019, the fee is increased to \$30) payable to the Montana Department of Justice to the following address:

> Montana Department of Justice PO Box 201403 Helena, MT 59620-1403

DO NOT MAIL YOUR FINGERPRINT CARDS TO THE OFFICE OF PUBLIC INSTRUCTION

The cards will be returned to you and your application for licensure will be delayed. The fingerprint cards <u>must</u> be sent to the Montana Department of Justice at the address above.

4. You will need to complete a separate fingerprint-based background report for both OPI and the school you will be working at. OPI cannot share the results with your school and your school cannot share the results with OPI.

For questions regarding the status of your background check call 406-444-3150. We will notify you by letter of rejected fingerprints and provide instructions on how to complete the process again.



FINGERPRINT BACKGROUND CHECK SUPPLEMENT

APPLICATION AND NOTICE PURSUANT TO THE NATIONAL CHILD PROTECTION ACT OF 1993 AS AMENDED BY THE VOLUNTEERS FOR CHILDREN ACT

(This supplement consists of three pages, including the Privacy Act statement.)

Complete pages 1 & 2 of this supplement, sign and return to: OPI, Educator Licensure, PO Box 202501, Helena, MT 59620-2501; or FAX to: MT OPI, Educator Licensure, 406-444-0743.

Licensure Applicant Name (please print):____

I have applied for employment as or will be applying for employment as a Montana Educator with (if known, write in employer name or write "unknown")______, for the position of (please be specific)______.

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act (VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

Pursuant to the VCA, the entity to which you have applied for employment or will be applying for employment requests a background check. Your rights and responsibilities under the VCA are as follows:

- Provide a set of fingerprints. These fingerprints will be used to conduct a search of FBI criminal history records. The entity conducting this background check may use the resulting record only for the authorized purpose(s) 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. 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).
- 2. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).
- 3. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
- 4. You are entitled to (a) obtain a copy of the background check report and (b) challenge the accuracy and completeness of any information contained in any such report and obtain a prompt determination as to the validity of such challenge before a final determination is made by the state government agency performing the background check. To obtain a copy of your fingerprint/background check results, the applicant must:
 - a. Present in person at the Educator Licensure office; and

- b. Provide a valid state or federal photo identification; and
- c. Write a request for a copy of the results, sign and date; and
- **d.** You will be provided with a copy of your fingerprint/background check results.

Or, 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 or by contacting Montana Criminal Records and Identification Services at PO Box 201403, Helena MT 59620. 28 CFR, 16.30 through 16.34.

5. Be advised that your educator license will not be issued until this supplement and your fingerprint background check results have been received and determined to meet the current requirements for licensing in the State of Montana.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to you.

PLEASE PRINT YOUR INFORMATION BELOW:

Name:							
I	First	Middle	Maiden	Last			
Date of Birth:							
Address:							
	Street			Apt.			
	City		State		Zip		

I have been convicted of, or am under pending indictment for, the following crimes (include the dates, location/jurisdiction, circumstances and outcome).

I have not been convicted of, nor am I under pending indictment for any crimes.

Your signature below acknowledges this entity has informed you of your privacy rights for fingerprint-based background check requests used by the entity for non-criminal justice purposes.

I have read and understand the foregoing and my certification is true and correct to the best of my knowledge and belief.

Date

Signature of Applicant

NOTE: Retain a copy of this completed supplement for your records.

You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.

This statement is provided to you for your records.

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).