

PLACE THIS ON YOUR AGENCY'S LETTERHEAD

TITLE 16 REQUEST FOR CRIMINAL RECORD CHECK

53 Green St.
Brattleboro
Vermont
05301

___ First Submission

___ Request for Secondary Dissemination from: _____
(name of school that completed original record check)

Please note it is the responsibility of the applicant to prove continuous employment at an approved/recognized school inside the state of Vermont with no break of service of one year or more since the original Criminal Record Check submission.

APPLICANT: _____
LAST NAME FIRST NAME MIDDLE NAME

MAIDEN OR OTHER NAMES USED: _____

ADDRESS: _____

GENDER: ___ RACE: ___ SOCIAL SECURITY NUMBER: _____

PLACE OF BIRTH: _____
CITY/TOWN STATE COUNTRY

DATE OF BIRTH: _____ TELEPHONE NUMBER: _____
MONTH/DAY/YEAR AREA CODE/ NUMBER

I, _____, hereby acknowledge and agree to a check of any record of criminal convictions per the VSA, Title 16, Chapter 5, Subchapter 4, which may be maintained by the Vermont Crime Information Center, criminal record repositories of other states where I have been employed or resided, and the FBI.

In addition to Vermont, I have resided or been employed in the following states:

I understand that the results of that check will be made available to: _____
for use in reviewing my suitability for employment. I further understand that within 30 days of receiving the results of the record check, I have the right to appeal the findings in writing to the Vermont Crime Information Center, Department of Public Safety, 45 State Drive, Waterbury, VT 05671-1300.

SIGNATURE OF APPLICANT: _____ DATE: _____

(Signed in the presence of school official or notary)

IDENTITY VERIFIED BY: _____ DATE: _____

(Signed by official making identification)