ONE TIME PRINT ONLY. DO NOT SAVE AND KEEP ON FILE FOR FUTURE USE.

RCHDIOCESE

Please always refer to the online version to ensure that you are using the most recent form. If an old version is brought in, you will be required to fill out a new one.

SELECTION.COM / ARCHDIOCESE OF CINCINNATI Fingerprint Release Form

*****	AT HOLICEINGINNATI.ORG			
For Office Use Only	TYPE OF PRINTS (check one) Results sent to Ohio Departm	•	☐ BCI and FBI r Certification: Yes	•
The follo	owing information is require	d. Please complete al	I fields and PRINT	legibly.
Legal Name:First Nai	// me Middle Initial	Last Name	Phone ()	-
Social Security #	Date of bir	th	Place of Birth	
Street Address	City_		_StateZip	
_ist your primary Archdioce :	se of Cincinnati parish /school/ institu	ution where you will work, the	<u>city</u> , your <u>role</u> and your	position.
Parish/School/Instituti	on City	Role (ED, EM, P) *	Position (what you	ı are doing there)

Are you currently or will you become any of the following (only applies to locations within the Archdiocese of Cincinnati):

Yes	No		ODE**
		Paid school bus or van driver	No
		Day Care Center employee (Child Daycare Center Owner, Licensed or Administrator Type A Daycare Home Owner	Yes***
		Maintenance staff: administrative staff, cafeteria staff, before-school care, after-school care, or any other non-licensed school employee	No
		Clerics residing/ serving with the Archdiocese of Cincinnati - includes priests, seminarians, deacons, religious women	No
		Paid teaching, including non-tax supported teacher, and School Personnel Holding a Pupil Services License/Registration (school nurse, counselor, social worker, OT, PT, audiologist, psychologist, speech pathologist)	Yes
		Paid substitute teacher (substitutes are cleared for all schools and do not need to list school(s) individually above)	Yes
		Paid teacher aide or paid classroom aide	Yes
		Paid lunchroom monitor or paid playground monitor	Yes
		Pupil Activity Supervisor, Athletic Director or Coach - THIS APPLIES TO ALL PAID / VOLUNTEER HIGH SCHOOL COACHES - Follow the same fingerprinting rules as teachers. We need both sent to the AoC and ODE.	Yes
		Non-paid student teacher or non-paid teacher doing pre-service field experience	Yes
		Church employees, parish staff	No

^{**} If Yes, the fingerprint results will automatically be sent to the Ohio Department of Education for certification/ licensure requirements.

SELECTION.COM® BCI/FBI INQUIRY RELEASE:

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize SELECTION.COM® (the WebCheck agency) to submit information to the Ohio Bureau of Criminal Identification and Investigation (BCI&I) to conduct a criminal record check for information relating to me. I voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction and juvenile delinquency adjudication records to the WebCheck provider, or agency I have designated to receive the information. I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees from all claims and liability related to this authorized criminal record review and dissemination. I hereby release BCI&I and any and all individuals identified in this request from all liability in connection with the dissemination of such criminal history information.

The authorization and waiver is valid for one year from the date this background check was conducted.

I have read the above disclosure and I hereby authorize the Archdiocese, its affiliated entities and authorized agents, and SELECTION.COM® or its authorized agents to obtain the above referenced information about me. A photocopy or facsimile of this authorization shall be as valid as the original. I agree that any and all disputes arising from this "Report" shall be brought only in state or federal court in the State of Ohio and shall be governed by, and construed in accordance with, the laws of the State of Ohio.

By initialing here, I acknowledge that I have reviewed ALL informatio that it is correct. I understand that once the information is submitted, no changincorrect, I will need to be fingerprinted again and that I will be solely responsible	•
Applicant Signature:	Date:
Printed Name of Parent or Guardian (if Applicant is under 18)	

155 Tri County Pkwy, Suite 115, Cincinnati, OH 45246 | PHONE: (513) 522-8764 (Ext. 3026) | EMAIL: customersupport@selection.com

Date:

Parent/Guardian Signature:

ED = Certified Ohio Department of Education educator, aide or high school coach; EM = paid employee; P = Priest residing/ serving within the Archdiocese of Cincinnati

^{***}The fingerprint results will automatically be sent to Ohio Department of Job and Family Services for certification/ licensure requirements.