

Child Care Fingerprint Criminal History Check Application

Neb. Rev. Stat. §71-1912 requires all child care staff members and individuals residing in a child care home who are 18 years of age or older to submit criminal history background checks. This application must be completed for each required individual. Failure to complete this application in its entirety will result in delayed dissemination of results.

Section I: This section must be completed by the Director/Owner of the Child Care Program			
Select which type of fingerprint is needed	<p>Role of Fingerprint Applicant</p> <p><input type="checkbox"/> Director <input type="checkbox"/> Provider <input type="checkbox"/> Employee/Teacher <input type="checkbox"/> Volunteer <input type="checkbox"/> College Student</p> <p><input type="checkbox"/> Household Member 18 years of age or older</p>		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px; vertical-align: top;"> <input type="checkbox"/> EXISTING Employee, Volunteer or Household Member? (Currently work or have worked in a child care program or is a current household member of a Family Child Care Home as of October 1, 2019) </td> <td style="width: 50%; padding: 5px; vertical-align: top;"> <input type="checkbox"/> NEW Employee, Volunteer or Household Member? (Never been fingerprinted for child care purposes, have not started employment, and/or not currently residing in child care program's home) </td> </tr> </table>	<input type="checkbox"/> EXISTING Employee, Volunteer or Household Member? (Currently work or have worked in a child care program or is a current household member of a Family Child Care Home as of October 1, 2019)	<input type="checkbox"/> NEW Employee, Volunteer or Household Member? (Never been fingerprinted for child care purposes, have not started employment, and/or not currently residing in child care program's home)
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Child Care Program: _____ License Number: _____ Phone Number: _____ Address: _____ Child Care Program Email: _____ *For fastest outcomes, results can be disseminated via program's email			
Director/Owner Statement: <i>I attest the information above is true and accurate regarding the applicant's status.</i>			
Signature: _____ Date: _____			

Section II: This section must be legible and completed by the individual applying for a Criminal History Check. Applicant's name must match the name given to the Nebraska State Patrol when fingerprinting is completed.	
Legal Name: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Last First Middle Initial </div>	
ALL Previous Names (alias/maiden): _____ Date of Birth (MM/DD/YYYY): _____ Phone Number: _____ Address: _____ City, State, Zip: _____	
Have you lived outside of Nebraska in the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which state(s)? _____	
<i>I give consent for Children's Services Licensing to check Nebraska and out-of-state registries and databases, as well as to disseminate my employment eligibility status to the identified child care program above. I also acknowledge that I have received the Privacy Act Statement and Noncriminal Justice Applicant's Privacy Rights disclosures as required by Federal law found at the end of this application.</i>	
Applicant Signature: _____ Date: _____	

Have you been an employee, volunteer, college student, or household member of a child care program within the last 180 days?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you had National FBI Fingerprint Criminal History Information Check completed by Nebraska State Patrol within the last five years for the purpose of being employed, volunteering, a college student, or living in a child care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you had National FBI Fingerprint Criminal History Information Check employment eligibility results disseminated by DHHS Licensure Unit within the last five years for the purpose of being employed, volunteering, a college student, or living in a child care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If you answered "YES" to ALL of the questions above, you will not need to submit a fee or fingerprints at this time. Only submit this fully completed application. Children's Services Licensing will disseminate your current eligibility status to the child care program identified.</p> <p>If you answered "NO" to any question above, you will need to complete this application and follow the "Instructions for Applicant" below.</p>		

Instructions for Applicant	<ol style="list-style-type: none"> 1. You will need 2 copies of this application. <ol style="list-style-type: none"> a. One copy to submit to DHHS at DHHS.ChildCareLicensing@nebraska.gov or mailed to: DHHS Licensure Unit, Children's Services PO Box 94986 Lincoln, NE 68509-4986 b. One to bring with you to the location you choose to get your fingerprints rolled. 2. Find a fingerprinting location in your area. A current listing of all locations can be found at: http://dhhs.ne.gov/licensure/Pages/Child-Care-Licensing.aspx Tip: Nebraska State Patrol locations have LiveScan capability and offer the quickest way to receive results. Completing fingerprints at an alternative site will result in increased processing time and may have an additional service fee. 3. Bring your government issued photo identification card (drivers license, passport, etc.) to the location identified. 4. Provide a copy of this completed application to the fingerprinting technician. 5. If the location is not a Nebraska State Patrol Troop location, you must submit fingerprints to the following address: Nebraska State Patrol - Criminal Identification Division 4600 Innovation Dr Lincoln, NE 68521 6. Pay the fee of \$45.25 to the Nebraska State Patrol. There are 2 ways to pay for fingerprint processing: <ol style="list-style-type: none"> a. Credit Card/E-Check: Pay \$45.25 by credit card at www.ne.gov/go/nsp. A small transaction fee will be added to your payment. b. Check or Money Order: Pay \$45.25 to: Nebraska State Patrol ATTN: CID 4600 Innovation Dr Lincoln, NE 68521
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Instructions for Fingerprint Technician	<p><u>LiveScan Fingerprinting:</u></p> <ol style="list-style-type: none"> 1. Select "Nebraska Applicant" workflow on the LiveScan. 2. Select "CCD DHHS Child Daycare Employee CCDBGA" or "CCDV DHHS Child Daycare CCDBGA Volunteer" (found in Section I - applicant's role). 3. If fingerprinting at a Nebraska State Patrol Troop location: <ul style="list-style-type: none"> • Print (1) fingerprint card to the "Nebraska State Patrol-Criminal Identification Division" fingerprint card printer <p>If fingerprinting at a location other than a Nebraska State Patrol Troop location:</p> <ul style="list-style-type: none"> • Print (1) fingerprint card for the applicant to mail to Nebraska State Patrol at the address listed above <p><u>Ink Rolled Method:</u></p> <ol style="list-style-type: none"> 1. In "Reason Fingerprinted" field of fingerprint card, select "CCD Daycare Employee" or "CCDV Daycare Volunteer" (found in Section I - applicant's role). 2. Roll (2) fingerprint cards for the applicant to mail to Nebraska State Patrol at the address listed above.
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For additional information, visit <http://dhhs.ne.gov/licensure/Pages/Child-Care-Licensing.aspx>.
If you need clarification or have any questions, we welcome your calls at 1-800-600-1289.

Privacy Act Statement (as of 3/30/2018):

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 regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

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.

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, 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 <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes 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.³

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).