

Diocese of St. Augustine Criminal Background Check School



Please complete both sides of form.
Type or print clearly all information in black or blue ink.

The Jessica Lunsford Act requires that all individuals who receive payment or remuneration of any kind for services performed while students are present, who have direct contact with students or who have access to or control of school funds must be cleared and retained by the Florida Department of Law Enforcement.

This information is being submitted in connection with my employment, compensation for services with / for students (such as coaches or other assistants) or volunteer service with:

Name of School _____

Job Title / Describe Duties _____

Name _____
Last First Middle (Maiden)

Social Security Number _____ Date of Birth _____

Race _____ Sex _____ Driver's License Number _____ State _____

Address _____

City/State _____ Zip _____ Email _____

Have you lived outside the United States during the most recent consecutive 5-year period? No Yes

If yes,
Country _____ Dates _____

Reason for living outside of the United States: Military Assignment Education Other _____

Have you ever been convicted, entered a plea of "no contest", had prosecution deferred or adjudication withheld for any crime, except a minor traffic violation? Yes No

If yes, please give dates and a full description _____

I hereby state that all of the information on this form is true and complete. I understand that this request will be used to conduct a criminal history background check to determine my suitability for service with the Diocese of St. Augustine. I understand that my service with the Diocese of St. Augustine may be terminated if any such information is later found to be false or incomplete.

Signature _____ Date _____

<u>For Diocesan Office Use Only</u>	
Date Processed: _____	Comments: _____
<input type="checkbox"/> Cleared as Employee on retention list <input type="checkbox"/> Cleared as a Volunteer only <input type="checkbox"/> Denied	
Authorized Signature _____	



Florida Department of Law Enforcement
Criminal Justice Information Services Division/User Services Bureau

PRIVATE SCHOOLS
WAIVER AGREEMENT AND STATEMENT
Volunteer & Employee Criminal History System (VECHS)
for Criminal History Record Checks
under the National Child Protection Act of 1993, as amended,
and Section 943.0542, Florida Statutes

Pursuant to the National Child Protection Act of 1993, as amended, and section 943.0542, Florida Statutes, this form must be completed and signed by every current or prospective employee, volunteer, and contractor/vendor, for whom criminal history records are requested by a qualified entity under these laws.

I hereby authorize Diocese of St. Augustine to submit a set of my fingerprints and this form to the Florida Department of Law Enforcement for the purpose of accessing and reviewing Florida and national criminal history records that may pertain to me. I understand that I would be able to receive any national criminal history record that may pertain to me directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34, and that I could then freely disclose any such information to whomever I chose. By signing this Waiver Agreement, it is my intent to authorize the dissemination of any national criminal history record that may pertain to me to the Qualified Entity with which I am or am seeking to be employed or to serve as a volunteer, pursuant to the National Child Protection Act of 1993, as amended, and Section 943.0542, Florida Statutes.

I understand that, until the criminal history background check is completed, you may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities. I further understand that, upon request, you will provide me a copy of the criminal history background report, if any, you receive on me and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before you make a final decision about my status as an employee, volunteer, contractor, or subcontractor.

I understand that a copy of the criminal history background report you receive on me will be released to the Department of Education.

A national criminal history background check on me has previously been requested by:

(Name and Address of Previous Qualified Entity)

(Year of Request)

I ___ have OR ___ have not been convicted of a crime.

If convicted, describe the crime(s) and the particulars of the conviction(s) in the space below:

I ___ do OR ___ do not authorize you to release my criminal history records, if any, to other qualified entities.

I am a current or prospective (check one): Employee Volunteer

Signature: _____ Date: _____

Printed Name: _____

Address: _____

Date of Birth: _____

Return original completed form to:

Safe Environment Office
Diocese of St. Augustine
11625 Old St. Augustine Road
Jacksonville, FL 32258

Schools – Criminal Background Check and Live Scan Instructions:

This is a two (2) step process. Until both segments have been completed, the criminal background check results will not be released to the submitting school.

- 1) Original Diocesan Criminal Background Check form sent to the Catholic Center
- 2) Successfully clear a Level 2 electronic fingerprint Live Scan

IMPORTANT: If you are, or will be, an employee in a school (including working as a substitute teacher, an extended day employee, a coach, construction site worker etc.), the Jessica Lunsford Act requires that you are screened using the 'Employees – Educators and School Staff' or the 'Contracted Personnel – Schools' code when submitting your fingerprints. **Fieldprint Code – FPStAugustineEdu**
Morphotrust Code – 16040156

Everyone will be required to enter contact information and demographic information.

Everyone will be asked to provide other personal information which is required by the FDLE /FBI in order to process the criminal background check.

You will be prompted to find a local scanning facility and to schedule an appointment. Payment arrangements will be requested. Instructions, maps, etc. for the facilities are provided online.

Fieldprint, Inc.:

If you have any questions about the scheduling process, please call 800-799-1067.

- Log on to www.fieldprintflorida.com website
- Click on 'Schedule an Appointment'
- Follow instructions for 'New User Sign Up' – Click on 'Sign Up'
- Select 'I Know My Fieldprint Code'
- Click on 'Continue'
- In the Fieldprint Code box enter the appropriate code from the list below: (*Codes are case sensitive.*)

		Fieldprint Code
<input type="checkbox"/>	Employees – Educators and School Staff	FPStAugustineEdu
<input type="checkbox"/>	Teacher Certification Candidates	FPStAugustineDOECert2
<input type="checkbox"/>	Contracted Personnel - Schools	FPStAugustineEdu
<input checked="" type="checkbox"/>	Volunteers	FPStAugustineVol
<input type="checkbox"/>	Vendors	FPStAugustineVol

- Click on 'Continue' – choose your location and schedule Appt.