



TRI-STATE FINGERPRINTING SVCS.

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National WebCheck & INK Fingerprinting Background Check Request/Release

Prints: BCI - \$45.00 (OH-State WebCheck) FBI - \$50.00 (Federal Webcheck) BCI & FBI - \$80.00 (State & Federal Web-Check) INK - \$50.00 (additional Cards-\$25.00) (Federal: **FBI - FD-258 Card**)

TRANSACTION #: _____ BCI/FBI-ORC Code: _____

LEGAL NAME: _____
(First) (Middle) (Last)

ADDRESS: _____

(City) (State) (Zip code)

(_____) _____ DOB: _____ SSN: _____
(State) Driver's License or Passport Number

Phone: _____ POB: _____ EMAIL: _____
(Place of Birth - City & State)

Have you lived in the State of Ohio for the past 5 years? Yes No

RACE: Caucasian/Hispanic _____ African American _____ Native Indian _____ Asian/Pacific Islander _____ Middle Eastern _____
SEX: _____ HEIGHT: _____ WEIGHT: _____ EYES: _____ HAIR: _____

Reason for Background Check: *Direct Mail Recipient: Attn: _____

Company: _____
Address: _____

Phone: _____ Fax: _____

DIRECT COPY OPTIONS: (Select only one)

- State Vision Professionals Board
- Ohio Dept. of Education
- PI/SG Ohio Dept of Public Safety
- BMV Dealer Licensing
- Ohio Racing Commission
- Child Care Center/Type A-ODJFS
- Lottery Commission
- Ohio Dept. of Agriculture-HEMP
- Ohio Board of Nursing
- Social Worker Board
- BMV Deputy Registrar
- Ohio Dept of Insurance
- Ohio Board of Pharmacy
- Ohio Construction Board
- Ohio Dept. of Real Estate & Professional Licensing
- Ohio Medical Board
- Ohio Veterinary Medical Licensing Board
- Ohio Dept of Liquor Control
- State Speech & Hearing Professionals Board
- Occupational Therapy, Physical Therapy & Athletic Trainers Board
- Other: _____

RELEASE OF BACKGROUND CHECK RESULTS:

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize this WebCheck Agency (ID No.: 012109 - Tri-State Fingerprinting Services, LLC) to submit information to the Ohio Bureau of Criminal Identification and Investigation (BCI&I/FBI) to conduct a criminal record(s) check for information relating to me. I also voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction(s) and juvenile delinquency adjudication records to the WebCheck provider or the following agency I have designated to receive this information as listed in *Direct Mail Recipient. I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BC&I and their employees and any and all individuals connected therewith from all claims and liability related to this authorized criminal records review and dissemination. This authorization and release are valid for one year from the date of this background check was conducted.

Applicant Name / Parent-Guardian Name (Print)

Fingerprint Technician Name (Print)

Applicant Signature

DATE

Fingerprint Technician Signature

DATE

BY SIGNING THIS FORM, the applicant acknowledges that ALL information on this form and computer monitor is correct. Any mistakes or errors are the responsibility of the applicant. We cannot make any changes once the WebCheck is submitted and resubmission cost will be at applicant's expense.