



Background Check Request

The total fee for a BCII/FBI check is \$75.00 Cash (in exact change), or personal check made payable to: **New Albany-Plain Local Schools** will be accepted. **Credit or debit cards will not be accepted.** Please complete this form and bring with you a valid driver's license or other photo I.D.

Name _____

Address	
Phone	
Check One:	<input type="checkbox"/> BCI <input style="margin-left: 150px;" type="checkbox"/> FBI <input style="margin-left: 150px;" type="checkbox"/> BCI & FBI

Please indicate the fingerprinting codes you wish to be fingerprinted for (NOTE: we will not fingerprint unless you provide the 2 reasons below as required by law for your institution):

FBI Reason: _____

BCI Reason: _____

Where would you like results mailed?

<input type="checkbox"/> Ready Set Grow	<input type="checkbox"/> Columbus Jewish Day School
<input type="checkbox"/> Jolly Tots Too	<input type="checkbox"/> New Albany Parks & Recreation
<input type="checkbox"/> AcademyOne (Preserve)	<input type="checkbox"/> Bright Start Learning Center
<input type="checkbox"/> AcademyOne (Woodcrest)	<input type="checkbox"/> Northridge School District
<input type="checkbox"/> Cornerstone Academy	<input type="checkbox"/> All Star Academy Learning
<input type="checkbox"/> Johnstown Monroe Local Schools	<input type="checkbox"/> Enchanted Care
<input type="checkbox"/> Kids Learn & Care	

Direct Copy to (Select only one):

<input type="checkbox"/> BMV Dealer Licensing	<input type="checkbox"/> Ohio Department of Education
<input type="checkbox"/> BMV Deputy Registrar	<input type="checkbox"/> Ohio Department of Liquor Control
<input type="checkbox"/> Child Care Ctr. /Type A-ODJFS	<input type="checkbox"/> Ohio Department of Public Safety (PISG)
<input type="checkbox"/> Construction Board	<input type="checkbox"/> Ohio Department of Insurance
<input type="checkbox"/> Lottery Commission	<input type="checkbox"/> Ohio Medical Board
<input type="checkbox"/> None	<input type="checkbox"/> Ohio Racing Commission
<input type="checkbox"/> OPOTA (Ohio Peace Office Training Acad)	<input type="checkbox"/> Ohio Veterinary Medical Licensing Board
<input type="checkbox"/> Occupation or Phys Therapy, Athletic Train	<input type="checkbox"/> Social Work Board
<input type="checkbox"/> Ohio Board of Nursing	<input type="checkbox"/> State Speech and Hearing Prof Board
<input type="checkbox"/> Ohio Board of Pharmacy	<input type="checkbox"/> State Vision Prof Board

I hereby certify that I have given agency 3SN536 (New Albany Plain Local Schools) permission to obtain all criminal history information pertaining to me in the files of the Ohio Bureau of Criminal Identification and Investigation.

Signature: _____

Date: _____



FBI Reasons:

- An Employee, Owner, Licensee, Administrator or Person Residing in a Type A or Type B Home, or an In-Home Aide
- Preschool Program
- Public School District or Chartered Nonpublic Schools includes teachers

BCI Reasons:

- An Employee, Owner, Licensee, Administrator or Person Residing in a Type A or Type B Home, or an In-Home Aide (5104 013)
- Preschool Program (3301 541)
- School Employees – non teaching positions (3319 39B1)
- School Employees – teachers only (3319 39B3)
- Other: _____
(you must provide the reason if you select “other”)