

**TARLETON STATE UNIVERSITY  
CRIMINAL HISTORY BACKGROUND CHECK  
CONSENT FORM**

Texas public schools are permitted by state law to obtain criminal history records of all personnel employed or involved in volunteer services in the public schools (Texas Education Code Section 22.083). The information requested below is necessary to obtain criminal history record information. I understand the information I am providing about age, sex, and ethnicity will be used only for the purpose of obtaining criminal record information.

<b>Name:</b>		
<b>Permanent Address:</b>		
<b>City, State, Zip:</b>		
<b>Permanent Phone:</b>	<b>Local Phone:</b>	
	<b>Date of Birth:</b>	
<b>Driver's License #:</b>	<b>State:</b>	<b>Expires:</b>

Sex:  Male  Female

Ethnicity:  Native American  
 Asian American  
 Hispanic  
 Black  
 White  
 Other

I understand the purpose for providing the above information. I authorize Tarleton State University to release this information to the necessary school districts in order for them to complete a criminal history background check.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

<b>Current Semester and Year:</b>	<b>Course Name and Number:</b>
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If there are any questions or concerns, please contact the Director of Field Experiences at 254-968-9811.

# DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, \_\_\_\_\_, acknowledge that a Computerized Criminal  
APPLICANT or EMPLOYEE NAME (Please print)  
History (CCH) verification check will be performed by accessing the Texas Department of Public  
Safety Secure Website and will be based on name and DOB information I supply. (This is not a consent  
form.) Authority for this agency to access an individual's criminal history data may be found in Texas  
Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent  
true identification to criminal history, therefore the organization conducting the criminal history  
check is not allowed to discuss with me any criminal history record information obtained using this  
method. The agency may request that I have a fingerprint search performed to clear any  
misidentification based on result of the name and DOB search. Once this process is completed the  
information on my fingerprint criminal history record may be discussed with me.

In order to complete the process I must make an appointment with the Fingerprint  
Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us /Crime Records/  
Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080,  
submit a full and complete set of fingerprints, request a copy be sent to the agency listed  
below, and pay a fee of \$24.95 to the fingerprinting services company.

**(This copy must remain on file by your agency. Required for future DPS Audits)**

\_\_\_\_\_  
Signature of Applicant of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Name (Please print)

\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

<b>Please:</b>	
<b>Check and Initial each Applicable Space</b>	
CCH Report Printed:	
YES _____	NO _____      _____ initial
Purpose of CCH: _____	
Empl____ Vol/Contractor____	_____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
<b>Retain in your files</b>	