

Request for a Background Check via Electronic Fingerprinting

Items needed at appointment:

This completed form / Drivers License or State ID Card / Cash, Check, or Money Order

<ul style="list-style-type: none"> • You Live within Clyde City Limits • Employment within Clyde City Limits • Employment with Clyde-GS School System 		
Ohio (BCI) Only -	\$27.00	
Federal (FBI) Only -	\$29.00	
BCI and FBI -	\$51.00	

<ul style="list-style-type: none"> • You DO NOT live within Clyde City Limits • Not-Employed within Clyde City Limits • Not-Employed with Clyde-GS School System 		
Ohio (BCI) Only -	\$67.00	
Federal (FBI) Only -	\$69.00	
BCI and FBI -	\$91.00	

Personal Information:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ DOB: _____ SSN: _____

BCI Reason for background check:

FBI Reason for background check:

Direct a copy of the results to:

Results should be mailed to (Required):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize the Ohio Bureau of Criminal Identification & Investigation to conduct a criminal records check for the information relating to me. I also voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction and juvenile delinquency adjudication records to the above listed agency or agencies. I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees from all claims and liability related to this authorized criminal record review and dissemination.

(Signature)

(Date)