## **DPS Computerized Criminal History (CCH) Verification**

(AGENCY COPY)

I,, acknown	owledge that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)	
History (CCH) check will be performed by accessing the Texas Department of Public Safety Secure	
Website and will be based on <u>name and DOB</u> identifiers 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 <u>any</u> 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	
the result of the <u>name and DOB</u> 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 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 or Employee	Please:
	Check and Initial each Applicable Space
Date	CCH Report Printed:
Crawford ISD	
Agency Name (Please print)	
	Purpose of CCH:
Agency Representative Name (Please print)	Empl Vol/Contractor initial
	Date Printed: initial
Signature of Agency Representative	Destroyed Date: initial
	Retain in your files
Date	