



Authorization to Release Criminal History

I understand that employment and/or service at Breakthrough is contingent upon satisfactory check of your criminal record (State, FBI and National Sex Offender Registry). I am aware that that my identity must be verified with a government issued photo ID. I understand that the results of these checks will be kept confidential, but could affect my eligibility to serve in AmeriCorps, serve as a volunteer, or work as staff with Breakthrough. I am aware that I have the right to review the findings. By signing below, I give permission for Breakthrough to check my criminal history.

Print Name: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number and State: _____

State of Residency: _____

** State of residency: an individual applying to serve or work who is enrolled as a full-time college student is deemed to be residing in the state where he/she lives for the purpose of attending school (without regards to whether or not the home is on or off campus, and whether or not that home is in the same state as the college is located).

____ I HAVE or ____ I HAVE NOT been arrested, convicted, pleaded guilty, or pleaded for deferred adjudication for any crime or charge.

Signature: _____ Date: _____

I hereby certify that I am the parent or legal guardian of _____, a minor under the age of eighteen years, and hereby consent on behalf of said minor for Breakthrough to run all of the aforementioned criminal history checks.

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

TX-DPS Computerized Criminal History (CCH) Verification

I, _____, acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. 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 match and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is not allowed to discuss any CHRI obtained using the name and DOB method. The agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint 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 and request a copy be sent to Breakthrough. Once this process is completed, the information on my fingerprint criminal history record may be discussed with me.

Based on the results of the National Service Criminal History Checks listed above:

- The individual has been deemed eligible to serve in/work with Breakthrough.
- The individual has been deemed ineligible to serve in/work with Breakthrough.

I also certify that the results of these checks have been kept confidential, that the program has paid for the checks, and that we have allowed the individual the opportunity to review any findings from the checks.

Authorized Program Staff Signature

Print Name

Date Individual Deemed
Eligible/Ineligible to Serve

For Operations Use:

NSOPW Report Printed:

Date Completed: _____ Initial: _____

Purpose of Criminal History check:

Purpose of CCH: _____

Employee _____ Vol/Contractor _____

CCH Printed: YES _____ NO _____ Initial: _____

Date Printed: _____ Initial: _____

Date Destroyed: _____ Initial: _____