

Request for a Background Check via Electronic Fingerprinting

☐ BCI

☐ FBI

☒ BCI & FBI

Personal Information (Please Print)

Name	_____	Picture ID #	_____
Address	_____	Date of Birth	____/____/____
City	_____	Social Security #	____-____-____
State & Zip Code	_____	Phone #	____-____-____

Complete this portion **only** if an FBI background check is needed:

Sex Race Height Weight Hair Eyes

Reason for Background Check:

Address for Results to be Mailed to:

Walsh Jesuit High School
4550 Wyoga Lake Rd., Cuyahoga Falls, Ohio 44224
ATTN: HR Dept. / Sally Froelich

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 record 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 Walsh Jesuit High School. 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.

Applicant's Name (Please Print)

Witness Name (Please Print)

Applicant's Signature (Date)

Witness Signature (Date)

Parent/Guardian Name (for Minors)

Parent/Guardian Signature

By Signing this form, the applicant acknowledges that all information on this form is accurate. Any mistakes or errors on this form are the responsibility of the applicant.