

Fingerprint and Background Check Process



Comprehensive Background Checks

Comprehensive Background Checks are broader in scope than Criminal Records Checks, ensuring more thorough vetting to uncover past criminal, sexual, abuse, or neglect offenses that require exclusions from access to licensed childcare agencies.

Comprehensive Background Check Searches

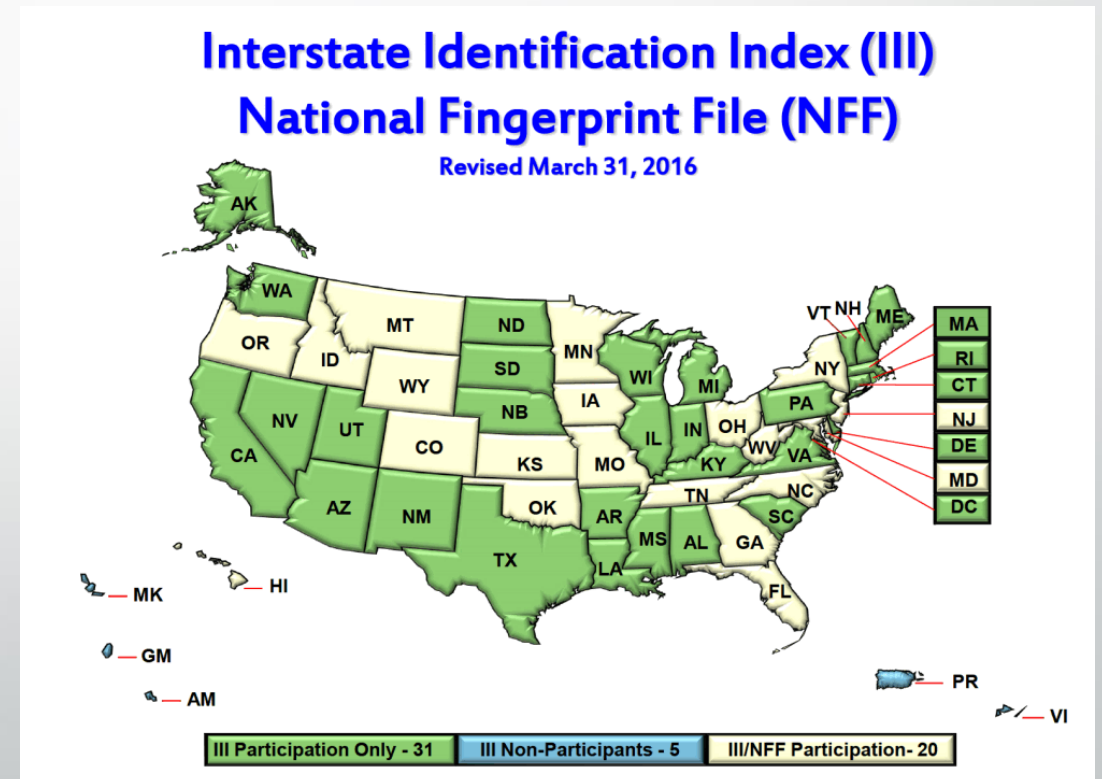
- National fingerprint-based criminal files (NICCS)
- TN fingerprint-based criminal files
- TN child abuse and neglect registry (DCS)
- TN Vulnerable Persons Registry (VPR)
- TN sex offender registry
- National sex offender registry
- Criminal files in states not included in the National crime databases for individuals who have lived outside of TN during the past five years.
- Child abuse and neglect registries in states not included in national registries for individuals who have lived outside of TN during the past five years.
- Sex offenders registries in states not included in national registries for individuals who have lived outside of TN during the past five years

Who Needs a Background Check?

- Anyone who works in a childcare facility licensed by Tennessee Department of Human Services (DHS) with unsupervised access to children, no matter what age, MUST complete a background check Tenn. Code Ann. §71-3-507(a)
- This includes:
 - ALL employees, directors, managers, and substitutes working for 36+ hours per year, person who are over the age of 15 years who resides in a childcare agency.
 - Contractors who provide services to children enrolled at the licensed childcare agency.

Why Does the Law Require Background Checks?

- The link below shows a map of which states participate in background checks.
- <https://www.fbi.gov/file-repository/interstate-identification-index-iii-national-fingerprint-file-nff.pdf/view>
 - Tennessee and 19 other states and territories participate in nationwide criminal information indexes, fingerprint files, databases, and registries.
 - The other 30 states, territories, District of Columbia, and commonwealth, and tribal lands do not.
 - To ensure that no one slips through that gap, Federal Law (CCDBG – Child Care and Development Block Grant) now requires additional criminal records and background checks for applicants who have lived outside TN during the past 5 years in a state, territory, commonwealth, or Tribal Land.



Fingerprinting Process

- Prior to getting fingerprinted, ALL applicants must complete the Child Care Fingerprint Sample Registration/Criminal/Juvenile History & State Registry Review Disclosure Form: <https://www.tn.gov/content/dam/tn/human-services/documents/hs-2779.docx>
- ALL applicants, both in-state and out-of-state, must complete this form.
- This form must be kept in the applicant's file at the adult OR childcare center Tenn. Code Ann. §71-3-507(a)(5)

Tennessee Department of Human Services
Child Care Fingerprint Sample Registration/Criminal/Juvenile History
& State Registry Review Disclosure

Fingerprint Registration Website & Call Number: <http://www.tnhs.gov> 1-866-228-2937

IF YOU FALSIFY INFORMATION ON THIS FORM,
YOU WILL BE SUBJECT TO CRIMINAL PROSECUTION

Note to Applicant: Log on to www.tnhs.gov or call 1-866-228-2937 to register and to schedule an appointment to provide your fingerprint sample. Be prepared to provide the information on this form when you register online or by phone. You must bring a valid state or federal photo ID (driver's license, passport, military ID). The fingerprint technician will give you a receipt after you have submitted your fingerprint sample, and you must return this receipt to the agency. The agency must attach the receipt to this form, which must be filed with the agency's staff records.

DHS ORF # TN 043 0002
TRANSACTION TYPE - DT

Name of Agency _____

Full Provider ID (FPI) # (including extension/suffix) _____

Part 1: Applicant Information

Last Name _____ First Name _____ Full Middle Name _____

Please list any other names you have ever used, including maiden name: _____

Date of Birth _____ Social Security Number _____

Place of Birth _____ City _____ State _____

Home Address _____ Street _____

City _____ State _____ Zip Code _____

Daytime Phone _____ Alternate Phone _____

Applicant Email _____

Sex _____ Race _____

Hair Color _____ Eye Color _____

Start Date & Position Verification Information in this box to be completed by the agency director:
Position _____ Prospective Start Date _____

For Drivers ONLY:
Will the duties of the person identified in Part 1 include driving for the agency? ☐ Yes ☐ No
If yes, please provide the following:
Driver's License # _____ State _____

List work history for the last five (5) years. If you need more space, use a separate sheet of paper:
Employer Name _____ From _____ To _____ Position _____

TCN # (from receipt) _____ Fingerprint date _____

TCNHS staff should check the "Form" section of the internet to ensure the use of current versions. Forms may not be altered without prior approval.
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Applicant name: _____ Applicant Social Security Number: _____

Employer Name (cont.) _____ From _____ To _____ Your Position _____

Part 2: Information for Criminal/Juvenile History Background Check and State Registry Review:

Name _____ Height _____ Weight _____ Skin _____

Please list the states (other than Tennessee) that you have resided in during the past five (5) years. See page 3 for further instructions.

State _____ From _____ To _____

Part 3: Additional Questions

Employment with a child care agency depends upon the outcome of the criminal/juvenile history background check and state registry reviews. This means that if a criminal or juvenile history background check determines that you have been convicted, or have pled guilty or no contest to certain crimes, or a juvenile court has found that you committed an offense that would be an excusable crime if you were an adult, or if you have certain pending criminal or juvenile charges, or you are indicated on the Department of Children's Services Indicated Abuse Perpetrator Registry, the Department of Health's Vulnerable Persons Registry, the Tennessee Bureau of Investigation's Sexual Offender Registry, you will not be able to be work in, volunteer at, provide substitute services to, reside in, or have any access whatsoever to the agency.

You must answer the following questions even if your records, including juvenile records, were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or lawyer, told you that you no longer have a record.

Have you EVER:

1. been arrested, cited, or detained by any law enforcement officer (including military police) ☐ Yes ☐ No
2. been charged with committing any crime or offense as a juvenile or an adult? ☐ Yes ☐ No
3. been convicted/found to have committed, pled guilty or pled no contest to any crime or juvenile offense? ☐ Yes ☐ No
4. been arrested for, charged with, convicted/found to have committed, pled guilty or pled no contest to DUI or DWI? ☐ Yes ☐ No
5. been placed in an alternative sentencing or rehabilitative program as a juvenile or an adult? (For example: diversion, deferred prosecution, withheld adjudication?) ☐ Yes ☐ No
6. received a suspended sentence, been placed on probation, or been paroled? ☐ Yes ☐ No
7. been in jail, prison, or a juvenile youth detention facility? ☐ Yes ☐ No
8. been charged with the violation of an order of protection? ☐ Yes ☐ No
9. been listed on the FBI sexual offender registry or sexual offender registry in any other state? ☐ Yes ☐ No
10. been listed in the TN Department of Health Vulnerable Persons Registry? ☐ Yes ☐ No
11. been listed on the TN Department of Children's Services Indicated Abuse Perpetrator registry for abuse or neglect? ☐ Yes ☐ No

You must complete the following table if you answered "YES" to any of the questions in 1 through 11 of Part 3 above. (If you need more space, please use a separate sheet.)

What was the criminal charge, juvenile offense, or registry listing?	Date	Location	Outcome or Disposition

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Applicant name: _____ Applicant Social Security Number: _____

Please explain any circumstances that should be considered in determining whether to allow you to work in, volunteer at, provide substitute services to, reside in, or have any access whatsoever to the center/agency: _____

The penalty for falsification of the information required on this form is criminal prosecution and can result in a jail sentence of up to eleven (11) months and twenty-nine (29) days or a fine of up to twenty-five hundred dollars (\$2500), or both.

By signing, I certify that in any state I have resided in the last five (5) years, I have not been indicated and am not listed on any state administrative registries for child abuse, vulnerable persons, sex offender, or any equivalent state administrative registry. I also certify that for any state I have resided in during the past five (5) years, I am not currently charged with, have not been convicted of, pled guilty or no contest to, or otherwise committed an offense that requires exclusion from access to licensed child care agencies pursuant Tennessee law (Tenn. Code Ann. 71-3-607). I certify, under penalty of law, that the information I have provided is complete and accurate. I authorize the release of any adult criminal or juvenile offense or any abuse registry records, or any information in the records, and any disclosures made in this form, to the agency at which I will be employed and to the Department of Human Services and any person or entity it may designate to assist in the review of my criminal/juvenile or abuse registry history.

Applicant Signature _____ Date _____

For Out-of-State Applicants Only

To complete your file please visit this website and follow the instructions for the specific state(s) that you have lived in:
<https://www.tn.gov/human-services/for-families/child-care-services/child-care-resources-for-providers/out-of-state-registry-check.html>

Name of Agency _____

Full Provider ID (FPI) # (including extension/suffix) _____

Street Address of Agency _____

I acknowledge that the law requires a fingerprint application to be submitted for this individual and attest that the information within this box is accurate.

Agency Director Signature _____ Date _____

Agency Email _____

TCN # (from receipt) _____ Fingerprint date _____

TCNHS staff should check the "Form" section of the internet to ensure the use of current versions. Forms may not be altered without prior approval.
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The information on this page serves as written notification that your fingerprints will be used to check the criminal history records of the FBI. If you have a criminal history record, and you wish to complete or challenge the accuracy of the information in the record, please follow the procedures outlined below.

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.84.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.¹

You have the right to expect that officials reviewing the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.²

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/foia/basirecord-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.84.)

¹ Written notification includes electronic notification, but excludes oral notification.
² See 28 CFR 65.12(b); 28 U.S.C. §343(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c); 20.33(d);
³ See 5 U.S.C. §552a(b); 28 U.S.C. §343(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c); 20.33(d)

TCNHS staff should check the "Form" section of the internet to ensure the use of current versions. Forms may not be altered without prior approval.
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Scheduling Fingerprint Appointment

- To schedule the applicant's fingerprint appointment, go to: www.identogo.com or call **1-855-226-2937**.
- When scheduling the appointment, provide the information listed on the applicant's Child Care Fingerprint Sample Registration/Criminal/Juvenile History & State Registry Review Disclosure Form.
 - * If prompted to provide a service code, or print code, due to the applicant having been fingerprinted within the last 5 years, contact the DHS Out of State Background Unit at 615-253-4170 or CCBackground.DHS@tn.gov*
- The applicant must bring a state or federal I.D. (driver's license, passport, military I.D., etc.) to their fingerprint appointment.
- Once finished, the fingerprint technician will hand the applicant a receipt. This receipt must be given to the adult or childcare agency for proof of fingerprinting and kept in the applicant's file.



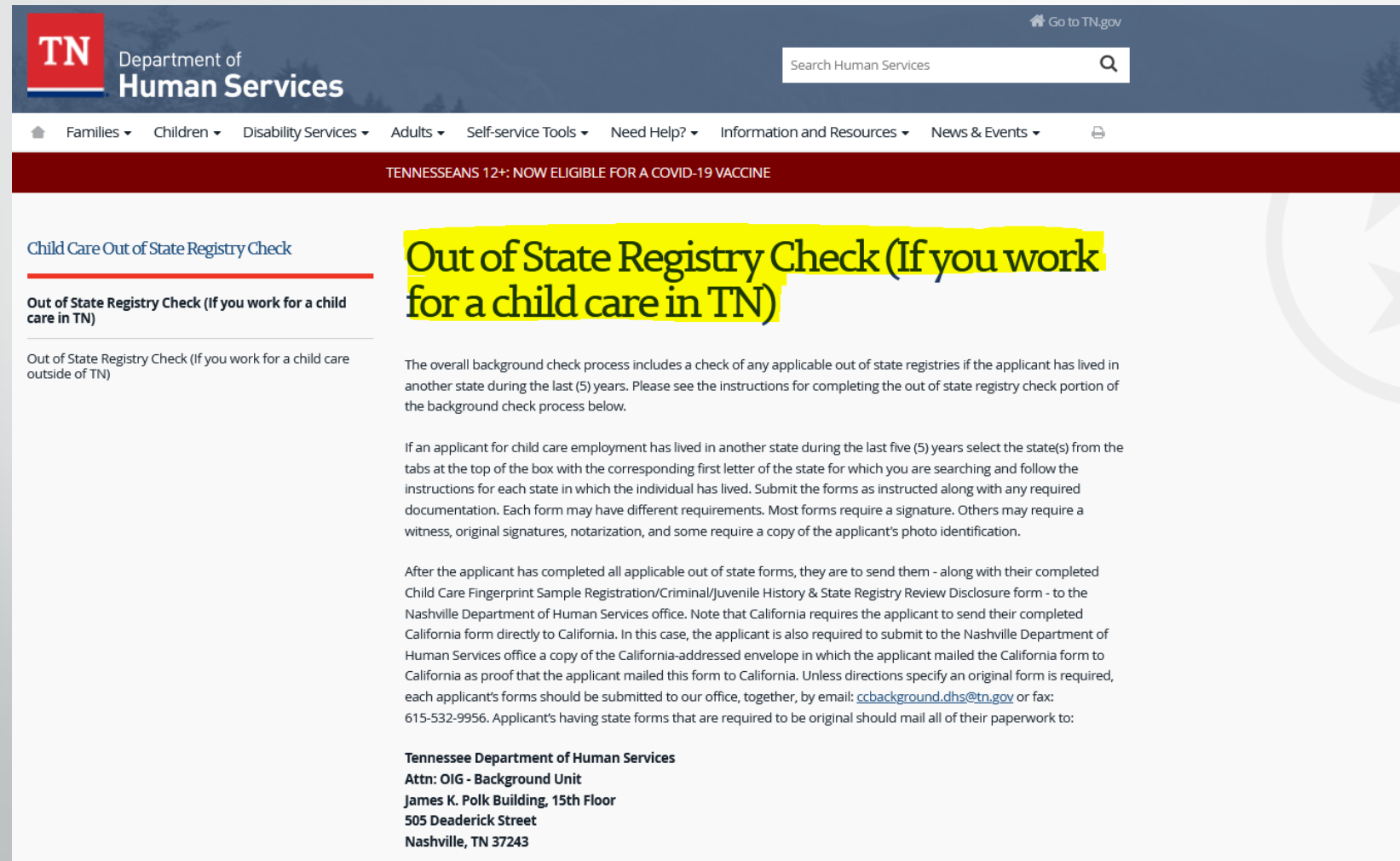
Out of State Background Check Process

- Out of State background checks are required if the applicant has **lived/worked/attended school outside of Tennessee within the last 5 years of the current fingerprint date.**
- The applicant must complete the out-of-state forms that are applicable to them.
 - Go to <https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-checko/out-of-state-registry-check--if-you-work-for-a-child-care-in-tn-.html> to find the correct form(s).
 - The applicant will need to follow the specific instructions listed on the check list for each state form they are completing.

Steps to Retrieve Forms

*Click the link below to access the state forms.

<https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check/out-of-state-registry-check--if-you-work-for-a-child-care-in-tn-.html>



TN Department of Human Services

Go to TN.gov

Search Human Services

Families ▾ Children ▾ Disability Services ▾ Adults ▾ Self-service Tools ▾ Need Help? ▾ Information and Resources ▾ News & Events ▾

TENNESSEANS 12+: NOW ELIGIBLE FOR A COVID-19 VACCINE

Child Care Out of State Registry Check

Out of State Registry Check (If you work for a child care in TN)

Out of State Registry Check (If you work for a child care outside of TN)

Out of State Registry Check (If you work for a child care in TN)

The overall background check process includes a check of any applicable out of state registries if the applicant has lived in another state during the last (5) years. Please see the instructions for completing the out of state registry check portion of the background check process below.

If an applicant for child care employment has lived in another state during the last five (5) years select the state(s) from the tabs at the top of the box with the corresponding first letter of the state for which you are searching and follow the instructions for each state in which the individual has lived. Submit the forms as instructed along with any required documentation. Each form may have different requirements. Most forms require a signature. Others may require a witness, original signatures, notarization, and some require a copy of the applicant's photo identification.

After the applicant has completed all applicable out of state forms, they are to send them - along with their completed Child Care Fingerprint Sample Registration/Criminal/Juvenile History & State Registry Review Disclosure form - to the Nashville Department of Human Services office. Note that California requires the applicant to send their completed California form directly to California. In this case, the applicant is also required to submit to the Nashville Department of Human Services office a copy of the California-addressed envelope in which the applicant mailed the California form to California as proof that the applicant mailed this form to California. Unless directions specify an original form is required, each applicant's forms should be submitted to our office, together, by email: cbackground.dhs@tn.gov or fax: 615-532-9956. Applicant's having state forms that are required to be original should mail all of their paperwork to:

Tennessee Department of Human Services
Attn: OIG - Background Unit
James K. Polk Building, 15th Floor
505 Deaderick Street
Nashville, TN 37243

Scroll all the way down and choose the corresponding letter tab for the state you are searching for. Then scroll down for the state and read ALL instructions. Repeat for each state.

Additional Information:

As the volume of registry check requests to other states increases, other states may change their process/forms to better accommodate those requests. Therefore, we will update this information as needed to reflect any changes in the process. ***If you require additional information about the background check process, you can contact us via the dedicated phone line at: (615) 253-4170.***

> A-D

> E-H

> I-M

> N-P

> Q-T

> U-Z

State Instructions:

- * First, under EACH state that applies to the applicant, click on the **Checklist** and read **all** instructions.
 - * Be sure to check off each item of the checklist as it is completed.
- * Next, under EACH state that applies to the applicant, click on each blue link next to **“Complete disclosure form”** and **“Complete the ____ form”**.
- * Lastly, under EACH state that applies to the applicant, read the **Instructions on how to send the forms to DHS** (TN Department of Human Services) Out of State Background Unit.
- * Do **not** send forms to the other states, unless instructed to do so on the state’s Checklist.

Alabama

Checklist: Alabama Checklist

Form: for CAN and Criminal

- **Complete disclosure form:** <https://www.tn.gov/content/dam/tn/human-services/documents/hs-2779.docx>
- **Complete the Alabama form:** https://www.tn.gov/content/dam/tn/human-services/documents/AL_Form_1598.pdf

Please note the following when completing the Alabama form:

- Alabama requires the original form
- Please make sure to include full name; ex. last name, first name, full middle name, no initials accepted
- Please make sure to include applicant's job/role
- Please make sure to include date of birth for all spouse, former spouse, children and stepchildren listed
- Please make sure to include all Alabama counties where applicant lived, worked or attended school
- Alabama requires a witness signature
- Applicant and witness signature dates must match

Instructions

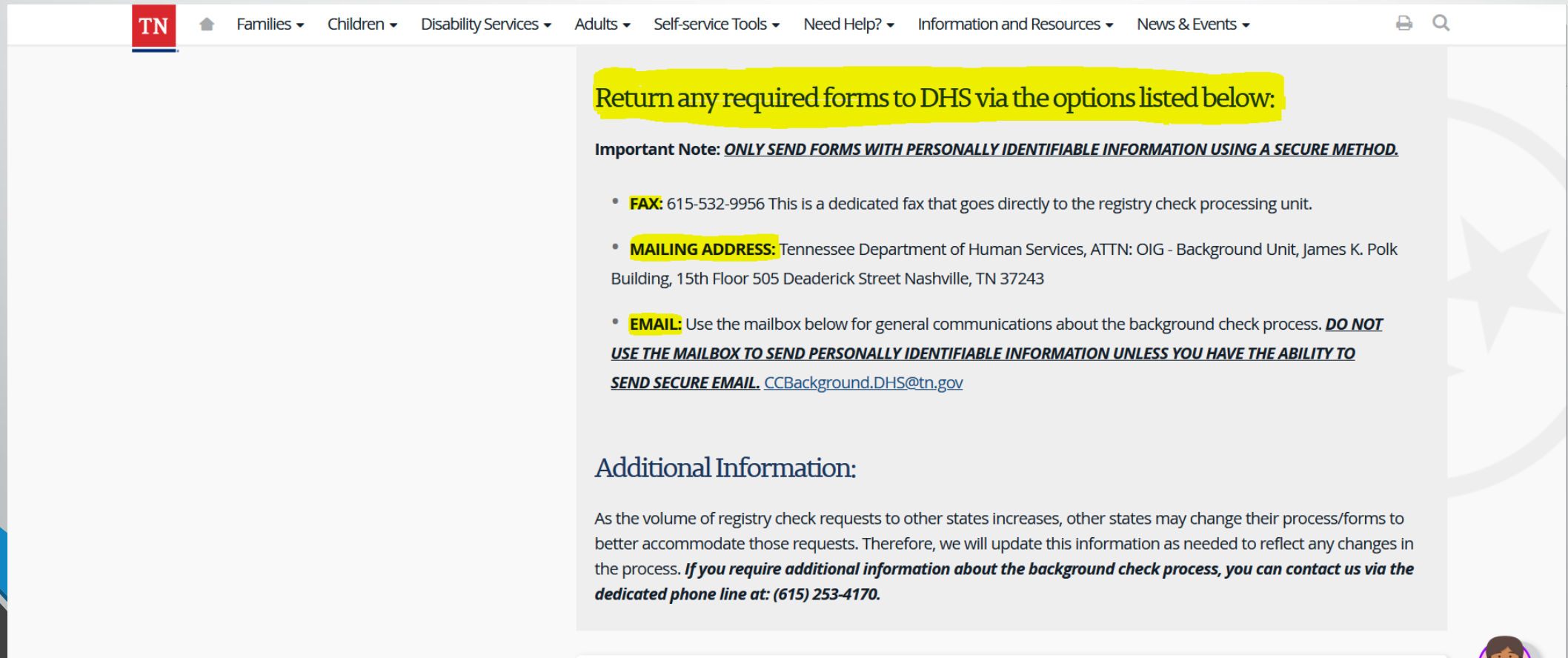
Mail a copy of the checklist, disclosure form and original Alabama form to:

Tennessee Department of Human Services
ATTN: OIG - Background Unit
James K. Polk Building, 15th Floor
505 Deaderick Street
Nashville, TN 37243

Disclaimer: Please do not send forms for applicants until at least one day after their fingerprints have been completed. And, please send all forms for each applicant, together, including the checklist.

Where Do I Send the Out-of-State Forms?

- *If **ANY** of the forms are required to be original (meaning the form was originally written on in black or blue ink and must be mailed directly to the DHS office), then **ALL** forms must be **MAILED to DHS**, along with **ONE** copy of the disclosure form.
- *If none of the forms are required to be original, then you may email or fax them, along with **ONE** copy of the disclosure form.
- *Do **NOT** send the forms to the addresses on the state forms, unless instructed to do on the Checklist.



The screenshot shows the Tennessee Department of Human Services website. The navigation bar includes links for Families, Children, Disability Services, Adults, Self-service Tools, Need Help?, Information and Resources, and News & Events. The main content area features a yellow highlighted header: "Return any required forms to DHS via the options listed below:". Below this is an "Important Note" in bold, italicized text: "ONLY SEND FORMS WITH PERSONALLY IDENTIFIABLE INFORMATION USING A SECURE METHOD.". A bulleted list provides three options: FAX (615-532-9956), MAILING ADDRESS (Tennessee Department of Human Services, ATTN: OIG - Background Unit, James K. Polk Building, 15th Floor 505 Deaderick Street Nashville, TN 37243), and EMAIL (CCBackground.DHS@tn.gov). A section titled "Additional Information:" explains that as the volume of registry check requests increases, other states may change their process/forms, and provides a dedicated phone line at (615) 253-4170 for additional information.

TN Families Children Disability Services Adults Self-service Tools Need Help? Information and Resources News & Events

Return any required forms to DHS via the options listed below:

Important Note: ***ONLY SEND FORMS WITH PERSONALLY IDENTIFIABLE INFORMATION USING A SECURE METHOD.***

- **FAX:** 615-532-9956 This is a dedicated fax that goes directly to the registry check processing unit.
- **MAILING ADDRESS:** Tennessee Department of Human Services, ATTN: OIG - Background Unit, James K. Polk Building, 15th Floor 505 Deaderick Street Nashville, TN 37243
- **EMAIL:** Use the mailbox below for general communications about the background check process. ***DO NOT USE THE MAILBOX TO SEND PERSONALLY IDENTIFIABLE INFORMATION UNLESS YOU HAVE THE ABILITY TO SEND SECURE EMAIL.*** CCBackground.DHS@tn.gov

Additional Information:


As the volume of registry check requests to other states increases, other states may change their process/forms to better accommodate those requests. Therefore, we will update this information as needed to reflect any changes in the process. ***If you require additional information about the background check process, you can contact us via the dedicated phone line at: (615) 253-4170.***

When Should I send the Out-of-State Forms?

- Wait at least **ONE day** after the applicant has been fingerprinted before sending the out-of-state forms to TN DHS.
- The forms must be sent to DHS **within 30 days** of the applicant being fingerprinted.

What Happens After DHS Receives the Out-of-State Forms?

- Once DHS receives all necessary Out-of-State Documents correctly, a Conditional Letter will be issued.
 - A Conditional Letter means that the applicant will only be allowed to work *under supervision* of another fully cleared applicant, until all results from the other state(s) have been received.
 - Once all results have been received, the Final Clearance Letter will be issued.
- 46-day Final Letters: If DHS has not received the results from the other state(s) by 45 days after the date of the conditional letter, then DHS will go ahead and issue the final letter on the follow day – the 46th day.


STATE OF TENNESSEE
DEPARTMENT OF HUMAN SERVICES
CHILD AND ADULT CARE LICENSING
JAMES K. POLK
505 DEADERICK STREET
NASHVILLE, TENNESSEE 37243-1403
TELEPHONE: 615-253-4170 FAX: 615-532-0866
TTY: 1-800-270-1349
www.tn.gov/humanserv

BILL LEE
Governor

CLARENCE H. CARTER
Commissioner

Datefield

ProviderContactName
ProviderName
ProviderMailAddress
ProviderCityStateZip

RE: Child Care Background Investigation for ClientFullName

Dear ProviderContactName2:

The individual named above was required to submit to a criminal background check and a review of their status on the Tennessee vulnerable person's registry, sexual offender registry, and the Department of Children's Services indicated abuse perpetrator registry. As a part of that process, the individual has submitted a fingerprint sample.

The state administrative registries have been reviewed to determine whether the individual must be excluded from child care agency access because they were listed on one of the registries. The equivalent state administrative registries in other states in which the individual has lived during the past five (5) years are also being reviewed to determine if the individual may be employed in a licensed child care agency in Tennessee.

At this time, the State has not received any information from the other states administrative registry reviews that would preclude them from working, living in, volunteering at, or substituting at your agency. This approval is **CONDITIONAL**, and requires that you be supervised by an individual who has received a final approved background check result at all times until you receive another final approval letter when the review process has been completed.

If you have any questions, please contact your licensing Program Evaluator.

Child and Adult Care Licensing

Excludable Crimes

Crimes that would exclude an applicant from working in child care based on Tenn. Code Ann. §71-3-507(e)(1)(A)(i), Tenn. Comp. R. and Regs. 1240-4-1-.07(3) are listed below:

- Physical, sexual, or emotional abuse or gross neglect of a child
- Any violence against a child
- Any violence against any person
- The manufacture, sale, distribution or possession of any illegal drug.
- If the applicant is found listed on the Vulnerable Person's Registry.
- If the applicant has been convicted of or plead guilty to any felony charge of operating a motor vehicle while intoxicated, within the last 5 years.

Waivers

- If an applicant is excluded, they will receive an exclusion letter in the mail.
- If the applicant can prove extenuating circumstances that clearly warrant an exception from the automatic exclusion and is legitimate, they may apply for a waiver.
 - However, ***Pending Crimes**: DHS will *not, under any circumstances*, grant a waiver while a criminal charge, juvenile proceeding, or perpetrator indication is pending. Individuals with a record showing a “pending” status of any type will not be granted a hearing before the Committee.*
- **Burden of Proof**: the burden is *on the appellant* to prove the extenuating circumstances which clearly warrant an exception.

Waivers (cont)

- Types of information that may be provided for Burden of Proof include:
 - Statements by the appellant and/or a representative of the appellant;
 - Statements from witnesses, e.g., a character witness who can speak regarding the appellant's activities since the last criminal violation;
 - Documentary evidence, e.g., certificate of completion for a treatment program, employer recommendations, etc.
- If there's no pending charges, the applicant must write a letter regarding the circumstances surrounding the charge, and why they would like to be granted a waiver, and submit it to DHS along with proof extenuating circumstances.
- To assist DHS in the waiver decision, there is a Waiver Advisory Committee, whose membership includes law enforcement personnel, persons experienced in child protective services, persons experienced in child development issues, child care providers, and persons representing elder care issues.

Waiver (cont)

- After the informal meeting, the Advisory Committee will make their recommendations to the DHS Licensing Director. The DHS Licensing Director will make the final decision of whether to approve the Waiver or not.
- If the waiver is DENIED, the applicant will receive instructions on how to appeal the decision and receive an Administrative Hearing.

Appeals

- If the waiver request is denied, the appellant will be sent a notice letter will include instructions on how to appeal the denial and receive an Administrative Hearing.
- In the appeal, you may only challenge the accuracy of the report of the Criminal Background Report by showing:
 - The conviction is improperly classified as an excludable offense;
 - Show that you are not the person identified on the record.

Waiver vs Appeal

* A **waiver** may be requested at any time, but an **appeal** can only be requested within **TEN** days of the mailing date of the letter.

***NO OPTION FOR WAIVER IF:**

1. You have pled no contest, pled guilty to, or were convicted of any of the following offenses:

***A) Felonies:**

- Murder
- Child abuse or neglect
- Crimes against children including child pornography
- Spousal abuse
- Crime involving rape or sexual assault
- Arson
- Kidnapping
- Physical Assault/Battery
- Drug crime within past 5 years

***(B) Misdemeanors:**

- Child abuse
- Child endangerment
- Sexual assault
- Misdemeanor Child Pornography

Waiver vs Appeal (cont)

2. If you made a materially false statement regarding a criminal background check
3. If you are registered, or are required to be registered, on a State sex offender registry or repository or the National Sex Offender Registry
4. If you have pending adult or juvenile criminal charges for any excludable offense
5. If you have a pending administrative determination of your status as “substantiated” on the Department of Children’s Services Abuse Registry

QUESTIONS?

- If you have any questions regarding the fingerprint/background check process, or waiver hearing, you may contact the Out-of-State Background Unit at:
 - Phone: 615-253-4170
 - Email: CCBackground.dhs@tn.gov