



Tennessee Department of Human Services  
**Adult Day Care Services Criminal/Juvenile History & State Registry  
 Review Disclosure**

Fingerprint Registration Website & Call Number: <http://www.identogo.com> 1-855-226-2937

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

Note to Applicant: Log on to [www.identogo.com](http://www.identogo.com) or call 1-855-226-2937 to register and pay for your background check, 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.

<b>DHS ORI #: TN DHS 000Z TRANSACTION TYPE - DT</b>										<b>Part 1 Applicant Information:</b>											
<b>Name of Agency:</b>										<b>Last Name</b>											
										<b>First Name</b>											
Full Provider ID (FEIN) # (including extension / suffix):										<b>Full Middle Name</b>											
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td> </tr> </table>																				<b>Please list any other names you have ever used, including maiden name:</b>	
<b>Street Address of Agency:</b>																					
<b>Start Date &amp; Position Verification (information in this box to be completed by the agency director):</b> <b>Prospective Start Date:</b> /    / <b>Position:</b> 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.										<b>Date of Birth:</b>											
										<b>Social Security Number:</b>											
<b>Agency Director Signature</b> _____ <b>Date</b> _____  <b>TCN # (from receipt):</b> _____										<b>Home Address:</b>											
										<b>City:</b>											
<b>Fingerprint Date:</b> /    /										<b>County:</b>											
										<b>State:</b>											
										<b>Zip Code:</b>											
										<b>Daytime Phone:</b>											
										<b>Alternate Phone:</b>											

**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 of \_\_\_\_\_

List work history for the last five (5) years. If you need more space, use a separate sheet of paper.

Employer Name	From	To	Your Position

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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<sup>1</sup> 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 16.34.
- 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.<sup>2</sup>

You have the right to expect that officials receiving 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.<sup>3</sup>

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/cjis/background-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 16.34.)

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<sup>1</sup> Written notification includes electronic notification, but excludes oral notification.

<sup>2</sup> See 28 CFR 50.12(b).

<sup>3</sup> See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d)