

SBI Fingerprint Instructions

Location: Henderson County Sheriff's Office - 100 N Grove St, Hendersonville, NC 28792

Sheriff's Office Availability: Friday 9:00 am

Please take the following forms with you to your SBI Fingerprinting. 1. **"Electronic Fingerprint Submission Release of Information"** 2. **"Authority For Release of Information"** 3. **"Applicant Information"**. All "Privacy Act" documents are for you to keep and review at your leisure.

*Once you have completed your fingerprinting, you will need to bring the following to Henderson County Human Resources Department located on 112 1st Avenue West, Hendersonville, NC 28792.

- Electronic Fingerprint Submission Release of Information
- Authority of Information
- Applicant Information
- Fingerprint card

*All Fingerprinting will be completed on a first come first serve basis. Please plan to arrive prior to the fingerprinting starting time. If no candidates are in line to be fingerprinted within 30 minutes of opening, fingerprinting will close.

If you would prefer to be fingerprinted at a specific time, you may use the link below to schedule a time that works best for you. Please note that by using the scheduling service you will be charged \$14 - \$20 dollars (depending on options selected) non-refundable.

[Henderson County Sheriff's Office Online Fingerprints Application](#)

ELECTRONIC FINGERPRINT SUBMISSION RELEASE OF INFORMATION

I authorize the North Carolina State Bureau of Investigation, to perform a national criminal history record check in connection with my application for employment with the agency listed below.

I understand that the North Carolina State Bureau of Investigation, Criminal Information and Identification Section, the Federal Bureau of Investigation, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I understand my rights to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.

Applicant/Licensee's Signature

Date

Applicant/Licensee's Printed Name

I authorize the above named subject to be fingerprinted and have the fingerprints submitted to the SBI electronically.

Agency Authorized Official's Signature

Date

Authorized Official's Printed Name

Henderson County Local Government

GOV000126

Agency Name

Agency OCA#

112 1st Avenue West, Hendersonville, NC 28792

828-697-4669

Agency Address

Agency Phone Number

I certify that I have taken the fingerprints of the above named subject and forwarded them electronically to the State Bureau of Investigation.

Signature of Official Taking Fingerprints

Date

This completed form is to be mailed to Agency listed above
Do NOT send this form to the SBI.

AUTHORITY FOR RELEASE OF INFORMATION

I authorize the North Carolina Department of Public Safety through THE STATE BUREAU OF INVESTIGATION to perform a fingerprint search of the State's criminal history record file and, if applicable, a fingerprint search of the FEDERAL BUREAU OF INVESTIGATION'S files for a national criminal history record check in connection with my application for employment, or my employment with COUNTY OF HENDERSON pursuant to CITY OR COUNTY GOVERNMENT EMPLOYMENT - STATE AND FED - NCGS 143B-945. I understand my rights to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or update of an FBI identification record are set forth in Title 28, CFR, 16.34

(Type or print clearly)

Last Name	First	Middle	Maiden
_____	_____	_____	_____
Social Security Number (Optional*)	Date of Birth	Sex	Race
_____	_____	_____	_____

I understand that the North Carolina State Bureau of Investigation and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the agency cannot provide a HARD COPY of the results of this criminal history record check to me.

*Disclosure of social security number is entirely voluntary and not required. If disclosed, the social security number will be utilized to assist with accurate identification/exclusion of possible criminal history records.

Applicant's/Employee's Signature

Date

GOV000126

This form must be maintained on file with the above named agency for one year. DO NOT MAIL THIS FORM OR A COPY OF THIS FORM TO THE STATE BUREAU OF INVESTIGATION.

APPLICANT INFORMATION

Last Name: _____

Date of Birth: _____

First Name: _____

Place of Birth: _____

Middle Name: _____

Residence: _____

Maiden Name: _____

Aliases: _____

Sex: ☐ Male ☐ Female

Race: ☐ White ☐ Black
☐ American Indian
☐ Asian or Pacific Islander
☐ Unknown

Height: _____

Weight: _____

Eye Color: ☐ Black ☐ Gray ☐ Maroon
☐ Blue ☐ Brown ☐ Green
☐ Hazel ☐ Pink ☐ Unknown

Hair Color: ☐ Bald ☐ Black ☐ Green
☐ Blonde ☐ Brown ☐ Gray
☐ Red or Auburn ☐ Sandy

Social Security Number:
(*optional) _____

Employer and Address:

CITY OF/ TOWN OF/ COUNTY
OF: County of Henderson. 112
1st Ave West, Hendersonville,
NC 28792

Reason Fingerprinted:

CITY OR COUNTY
GOVERNMENT EMPLOYMENT
- STATE AND FED - NCGS
143B-945

Agency Case #: GOV000126

Type of Transaction: NFUF

Non fed-User Fee

NC FP Card Type: OTH

**OTHER **

**Disclosure of social security number is entirely voluntary and not required. If disclosed, the social security number will be utilized to assist with accurate identification/exclusion of possible criminal history records.*

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Applicant Notification and Record Challenge

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot 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.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).