



**BACKGROUND CHECKS**

**DRIVER TRAINING INSTRUCTOR REGISTRATION**

**MAIL RESULTS TO:**

FULL NAME			DRIVER TRAINING SCHOOL		
PRESENT ADDRESS			SCHOOL ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
PHONE	SS#		SCHOOL #	ATTENTION	
EMAIL			DRIVERS LICENSE#		

**REQUEST FOR FINGERPRINT SUBMISSION AND REASON CODES**

- BCI only (NO ORC – Other: Driver Education Certificate)
- FBI only (NCPA / VCA – Volunteer Children’s Act)
- BCI & FBI

**RELEASE OF BACKGROUND CHECK RESULTS**

I hereby certify that I have given permission to obtain all criminal history information pertaining to me in the files of the Ohio Bureau of Criminal Identification and Investigation (BCI&I) and release that information to the Ohio Department of Public Safety, Driver Training Program Office.

By placing my fingerprint images on the WEBCHECK Scanner, I am authorizing BCI&I to release criminal history information about me to Ohio Department of Public Safety, Driver Training Program Office and to the driving school listed above for a period of one year from the date of this transaction.

I hereby release BCI&I and any and all individuals connected therewith from all liability in connection with the dissemination of such criminal history information.

I understand there is a small possibility my fingerprint images may be unreadable by BCI&I and I may need to be re-fingerprinted. This is not a reason for a refund, since BCI&I charges as soon as the data is transmitted.

SIGNATURE <b>X</b>	DATE
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