



Fingerprinting/Background Check Consent Form

Consent Guidelines

I hereby authorize the Cobb County School District to receive any criminal and/or driver's history record information pertaining to me, which may be in the files of any state or local criminal justice agency. I further give consent to the district to have my fingerprints taken as part of the employment process and to perform periodic criminal history background checks for the duration of my employment with the district. Fingerprinting for employment as required by O.C.G.A. § 20-2-211.1 is requested by the Deputy Superintendent and will be administered by the Cobb County School District's Human Resources Department.

I understand that neither the GCIC, its employees, nor any other agency or employees of the State of Georgia shall be responsible for the accuracy of information nor have any liability for defamation, invasion of privacy, negligence or any other claim in connection with any dissemination of information pursuant to this record check, and shall be immune from suit based upon any such claims.

By signing this form, I am attesting that I have disclosed any and all previous Criminal and/or Driver's history information requested on the application; and that failure to accurately disclose criminal history information and/or any misstatement or omission of any information requested shall be a reason for non-employment or dismissal from employment. I also acknowledge that by signing this form I have received the Applicant Privacy Rights and Privacy Act Statement (attached).

There are fees associated with fingerprinting. CCSD employees who are fingerprinted through the Cobb County School District Human Resources Department will have a one-time, non-refundable deduction from their paycheck. Other individuals who are fingerprinted through the Georgia Applicant Processing Service will self-pay when registering. Fingerprint charges may vary.

Personal Information (All fields required – PLEASE TYPE OR PRINT)

Work or Volunteer Location: _____ Position: _____

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #
() -
City State Zip Code Phone Number:

Eye Color: _____ Sex: Female Male

Hair Color: _____ Race: _____

Height: _____ Date of Birth: ____/____/____

Weight: _____ Place of Birth: _____

Driver's License #: _____ Social Security #: ____ - ____ - ____

Signature: _____ Date: _____

For office use only

Agency: Cobb County School District Police Department Date: _____

Signature: _____ Signature: _____
Chief, Cobb County School District Police Department Terminal Operator

Fingerprint Date: _____ Run Terminal Results: _____

Date Logged: _____

Agency: Cobb County School District-Human Resources Date Cleared: _____

Background Check Type: Fingerprinting GCIC (local check)

Authorized Administrator or CCSD HR Representative

PLEASE KEEP THIS PAGE FOR YOUR RECORDS

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. 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 Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- 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 employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials may provide you with a copy of your 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 find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: <https://www.edo.cjis.gov>
- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge 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.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the 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.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

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.

As of 02/04/2021