

DECLARATION OF PRIOR CRIMINAL CONVICTION AND MILITARY HISTORY

As required by SDCL 26-6-14.5 for employment, residence or presence in a child welfare agency, this declaration must be completed and retained in the employee/provider/volunteer file. For adoptive and foster homes approved/licensed by DSS, a copy of the form should be submitted with FBI fingerprint cards to the Office of Child Protection Services, 700 Governors Drive, Pierre, SD 57501-2291.

Reason for Criminal Record Check

____ Applicant or ____ Adult Household Member for ____ Adoption ____ Foster Care ____ Kinship Care
Or ____ Applicant or Volunteer in Licensed Child Welfare Agency

The following comprises a complete history of prior criminal convictions and military history for:

Name: _____

Soc Sec #: _____; Birthdate: _____

Crime Convicted Of	Date of Conviction	Sentence or Disposition
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Branch of Service	Dates of Service	Type of Discharge
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby declare and affirm under penalty of perjury that the foregoing information is true and correct to the best of my knowledge and belief. I understand my fingerprints are being submitted for criminal record checks for the purpose of, adoption or kinship care approval, foster home licensure, household member in a licensed or approved resource home, or for employment or a volunteer in a licensed child welfare agency. I have been informed I may review my criminal history record information or challenge the finding of an FBI criminal record check by contacting the local jurisdiction that submitted the information to the FBI or by writing to FBI CJIS Division – Record Request (Use “FBI CJIS Division – Correspondence Group” for challenge); 1000 Custer Hollow Road; Clarksburg, West Virginia 26306 as outlined in 28 CFR 16.34.

Signed this _____ day of _____, 20____

Agency Return Address

(Signature)

(Agency & Contact Person Name)

Street Address and/or PO Box Number

Street Address and/or PO Box Number

City State Zip

City State Zip