

## **Education Standards and Practices Board**

2718 Gateway Avenue, Suite 204 Bismarck, ND 58503-0585 (701) 328-9641 (701) 328-9647 fax http://www.nd.gov/espb

# **Fingerprinting Instructions and Forms**

(January 2020)

The fingerprinting process can be conducted at a sheriff's office, a police department, by campus police, or by an agency authorized to take fingerprints. **Two** cards must be completed with a ten-finger check and should not be folded, bent, or altered in any way. If your fingerprinting is processed and transmitted electronically by a law enforcement center in North Dakota, you will only receive one fingerprint card and a Fingerprint Acknowledgement. Form from the fingerprint agent. You will be responsible to pay any fees charged by the fingerprinting agent.

Every space on the top section of the fingerprint cards must be completed, as indicated on the attached example card. The fingerprinting agency may request the ORI, which is ND920110Z, and Reason Fingerprinted, which is Teacher Licensure in accordance with NDCC 15.1-13-14.

Collect the following items and take them with you when you get fingerprinted:

- Envelope large enough to mail 2 8x8 inch fingerprint cards
- Money order for \$44.50 made out to ESPB
- Fingerprint forms from the ESPB Fingerprinting Instructions and Forms

After you have been fingerprinted, submit the following in a sealed envelope signed by the fingerprint technician to the North Dakota Education Standards and Practices Board at 2718 Gateway Ave, Suite 204, Bismarck ND 58503:

- 2 completed fingerprint cards -OR-, if your fingerprints were completed and transmitted electronically by a North Dakota law enforcement center, 1 fingerprint card and Fingerprint Acknowledgement Form
- ESPB Fingerprint Verification form
  - o Applicant must complete Part 1
  - o Fingerprint Technician must complete Part 2
- Criminal History Record Check Request Form
  - o Complete the last section titled "To Be Completed by Subject of Record Check"
  - O Sign and date the form
- Money order for \$44.50 made out to ESPB

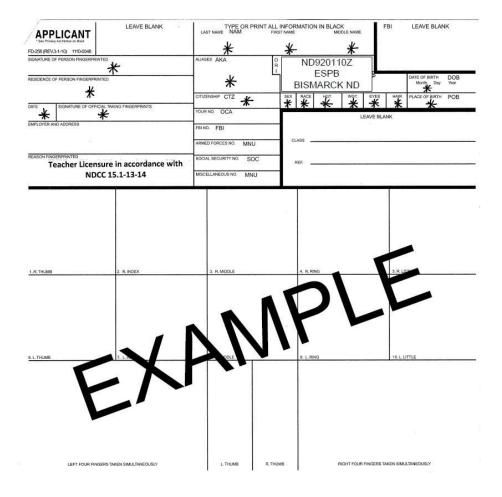
You will receive an email from <a href="mailto:espbndteach@nd.gov">espbndteach@nd.gov</a> once your background check has been completed.

\*\* Please keep the confirmation email for your records, since it will be the only confirmation you will receive regarding the results of your background check. \*\*

The BCI and FBI check may take six weeks or more for processing. Please allow sufficient time for the fingerprint check and completion of the licensure process before beginning any teaching position. North Dakota law requires a current valid North Dakota teaching license for employment.

Never go into a classroom to teach without a valid North Dakota license. There is a \$50 a day fine, which you are responsible to pay, if you are employed as an educator without a license.

Fingerprinting requirement in accordance with NDCC 15.1-13-14. ESPB does not advocate, permit nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.



# Codes for Demographic Information:

Race	Eye and Hair Color	
A – Asian/Pacific Islander	BLD – Bald	MAR - Maroon
B – Black/African American	BLK – Black	MUL – Multi-colored
I – American Indian or	BLN – Blonde or Strawberry	ONG – Orange
Alaskan Native	BLU – Blue	PLE – Purple
W – White or Hispanic	BRO – Brown	PNK – Pink
U – Unknown	GRY – Gray	RED – Red
	GRN – Green	SDY – Sandy
	HAZ – Hazel	WHI – White



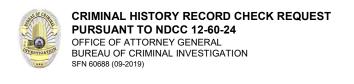
# **ESPB Fingerprint Verification Form**

Last Name	First Name	ase Print Legibly	Middle Name	
Maiden/Former Last Name	s	Social Security	lumber	
Mailing Address	Tailing Address Email Add		dress – REQUIRED FOR TIMELY PROCESSING	
City	State		Zip Code	
Home/Cell Phone Number	Work Phone I	Number	Date of Birth	
Fingerprints submitted	will be used to check the cr	iminal history record	s of the FBI and the North Dakota BCI.	
Date			ignature of Applicant	
•	leted by fingerprint to			
1. Please fill out	gerprints. If the individual is	t has filled out all the	e required boxes on the fingerprint card prior escan, please do NOT fill out card prior to be	
•		·	the applicant and compare the physical othe information on the fingerprint card.	
<ol><li>Fill out the inf</li></ol>	formation in the boxes below	w. Please print clearly	y.	
write your na		the edge of the seal.	nd this form into the envelope and seal it. Ple Return the sealed envelope to the applicant. e envelope.	
Date:	Name of Applicant:			
Name of Fingerprint Tec	hnician (print):			
Fingerprint Technician's	Agency/Company Name:			
Type of Photo ID Provide	ed (check one):Driver's I	LicensePassport	COther (please specify)	
or ESPB Use Only				

FBI Report Received

NASDTEC Clearinghouse

\_\_\_\_\_ Clear / Hit



INSTRUCTIONS				
1. Please type or print legibly and ensure that all information is	complete. Incomplete or illegible requ	ests will be	ereturned.	
2 If requesting Federal Bureau of Investigation (FBI) check, att subject of the record check and remit appropriate fees.	ach two (2) completed fingerprint cards (	containing t	he fingerprints of the	
TO BE COMPLETED BY AGENCY				
Mail to Attention of Amy Bigelow			one Number 28-9641	
Agency Name Education Standards and Practices Board			Originating Agency Identifier (ORI) ND920110Z	
Address 2718 Gateway Avenue, Suite 204		Email A espbinf	Address o@nd.gov	
City Bismarck		State ND	ZIP Code 58503	
Comments/Miscellaneous				
AGENCY USE ONLY				
Please Check One and Remit Appropriate Fees  Record Checks for Employees/Others	Pagerd Cl	necks for V	/aluntaara	
Record Checks for Employees/Others	Record Cr	IECKS IOI V	oluliteers	
	☐ ND o	nly, remit \$	15.00	
FBI only, remit \$26.25	☐ FBI o	only, remit \$	524.25	
ND and FBI, remit \$41.25	☐ ND a	nd FBI, ren	nit \$39.25	
Process Control Number (PCN)				
TO BE COMPLETED BY SUBJECT OF RECORD CHECK				
Last Name	First Name (no initials)	Middle Name		
Last Name(s) (AKA/Maiden/Former)	First Name	Middle Name		
Date of Birth	Social Security Number	ber		
Current Address				
City		State	ZIP Code	
Your fingerprints will be used to check the criminal history records to review or challenge the accuracy of the information contained in correction, or updating an FBI identification record are set forth in	the FBI identification record. The proce			
I understand the Applicant Rights provided on the following page a release my state and FBI criminal history records to the requester		ureau of Cr	riminal Investigation to	
A photocopy of this signed release shall have the same force and	effect as the original release.			
Signature		Date		

Signature	Date

Your social security number is requested to permit the North Dakota Bureau of Criminal Investigation to conduct a criminal history record check under N.D.C.C.§ 12-60-16.6. Disclosure of your social security number is voluntary, however, if you choose not to disclose it, you will be required to provide alternative information or documentation, which may delay the criminal history record check.

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## APPLICANT RIGHTS

APPLICANT: Please review and retain for your records.

## **Privacy Act Statement**

As of 03/30/2018

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.

### 28 CFR 50.12(b)

Officials at the governmental institutions and other entities authorized to submit fingerprints and receive FBI identification records under this authority must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. The officials making the determination of suitability for licensing or employment shall provide the applicants the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. These officials should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record, or has declined to do so. Those officials making such determinations must advise the applicants that procedures for obtaining a change, correcting, or updating of an FBI identification record are set forth in 28 CFR 16.34. A statement incorporating these use-and-challenge requirements will be placed on all records disseminated under this program. This policy is intended to ensure that all relevant criminal record information is made available to provide for the public safety and further, to protect the interests of the prospective employee/ licensee who may be affected by the information or lack of information in an identification record.