Federal Criminal Background Check

The College of Education at Montana State University Billings (MSUB) requires that a national criminal history background check, including fingerprinting, to be completed for all candidates enrolled in the Educator Preparation, ABA, or School Counseling Programs. Candidates cannot be admitted to the programs until this process has been completed.

Many school districts and counseling agencies in Montana, as well as most states require criminal background checks. Montana, by state law, will not issue a teaching license or school counseling license/endorsement until this process has been completed and the results reviewed by the Office of Public Instruction. As stated in Chapter 57, 10.57.201A, 2, number 10, “a conviction; including a conviction following a plea of Nolo contendere; a conviction with a suspended or deferred sentence or any other adjudication treated by the court as a conviction, may be considered by the Superintendent of Public Instruction in the licensure process if the conviction was for a sexual offense, a crime involving violence, the sale of drugs, theft, or any other crime meeting the criteria of Title 37, Chapter 1, part 2, MCA’.”. A criminal history may prevent a candidate from attending field experiences and/or being licensed.” Candidates with a criminal record may need to proceed through the college appeals process before being allowed to continue to take courses. Candidates will be contacted if there is a reason for concern on the report. Continued enrollment at MSU Billings does not imply that licensing is guaranteed. The college does not make licensing decisions; the college recommends individuals to the Office of Public Instruction for licensure. The Montana Office of Public Instruction Licensure Division will review the recommendation including the background report and proceed according to state policies, procedures, and laws.

Candidates must be advised that any criminal charge is especially problematic for candidate placements in the EDU 220/EDU 220L and SCOU 594 courses. The placements made for these courses are most often done in social service agencies that do not allow any type of criminal record or offense.

Candidates must sign a notarized release so that MSUB may share information with the appropriate agencies, state licensing units or school districts. If a candidate chooses not to sign the waiver, it could prevent placement at any particular site and may be cause for proceeding through the college appeals process.

Criminal background checks are mandatory for all field experiences, internships including School Counseling and ABA Internships, clinical practices. Students complete an initial fingerprint–based national background check to apply and be registered for EDU 220 and EDSP 204. A second background report is completed and required to apply for student teaching. School Counseling Internships, SCOU 590, require that a background report be less than two years for the duration of the internship. A background report must be on file for any candidate to enable registration for a course requiring the criminal background report. A break in attendance of one year or more requires the candidate to complete the fingerprint process to obtain a new criminal background report.

If you have a state and federal fingerprint based report on file with a Montana public school or school district, or a unit of the Montana university system, those results can be disseminated from one public education agent to another, as long as the Montana public school report is less than 2 years old. Please note that schools are not required to keep fingerprint results on file after completing the hiring process. It is against FBI policy for results to be shared across state lines or from private institutions (colleges and universities, or private schools). Additionally, you are required to submit the notarized Self-disclosure and Informed Consent with applicable Disclosure of Information forms. Please review the information on our website to request another Montana public school to share background information with MSUB:
http://www.msubillings.edu/coe/FingerprintInfo.htm

Answers to Frequently Asked Questions can be found on the College of Education website in the Fingerprint Information link:
http://www.msubillings.edu/coe/FingerprintInfo.htm
The Process

1. Choose a fingerprinting service (below are the services in Billings). Be prepared to pay the service fee. County sheriff’s offices and some police departments may also fingerprint. Contact them before going; they may have specific restrictions, may not do fingerprinting, or do fingerprinting by appointment only - **Government issued ID always required for fingerprinting services and you must know your social security number** Face Masks required**

<table>
<thead>
<tr>
<th>Service</th>
<th>Location</th>
<th>Website:</th>
<th>Fee and Appointment Details</th>
<th>Payment Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSUB University Police Department</td>
<td>1st floor of the Poly Drive Parking Garage, Use Parking Office door</td>
<td><a href="https://www.msubillings.edu/police/">https://www.msubillings.edu/police/</a></td>
<td>By appointment only through website - must login to obtain scheduling option</td>
<td>Cash or Check only $10.00 1st card $5.00 additional card(s)</td>
</tr>
<tr>
<td>Crime Prevention Center (CPC)</td>
<td>2910 3rd Ave. North Billings, MT</td>
<td>Phone: 247-8590</td>
<td>By appointment only</td>
<td>Cash or Check only $15.00 per card</td>
</tr>
<tr>
<td>Call O Way Fingerprinting</td>
<td>1140 1st Ave. N., Suite 302 Billings, MT</td>
<td>Phone: 281-3473 (Amber) 371-3630 (Rahim)</td>
<td>8am – 5 pm, Mon-Sat By Appointment Only Same day appointments available</td>
<td>Cash or Credit/Debit $15.00 per card, with student ID $13.00</td>
</tr>
</tbody>
</table>

2. Submit the following five items to one of the Administrative Associates in the Office of Educational Theory and Practice (ETP), Rooms 261, 264, or Licensure Officer in Room 262; by mail, send to Jennifer Burns, Licensure Officer, COE Rm. 262, 1500 University Drive, Billings, MT 59101 (do not bend cards):
   - printed fingerprint card with completed personal information
   - $30.00 check or money order made out to the Montana Department of Justice
   - signed Applicant Rights and Consent to Fingerprint
   - completed, signed NCPA/VCA Applicants document – be sure two of three boxes are checked
   - Notarized Self-Disclosure and Disclosure of Information Form(s) if applicable

3. ETP submits the cards and fees to the Montana Department of Justice, Criminal Records Identification Services Section (CRISS) for processing. Fingerprint Cards cannot be submitted to the CRISS without the completed and signed Applicant Rights and Consent to Fingerprint and NCPA/VCA Applicants forms.

4. The CRISS in Helena sends the cards to the FBI.

5. Within 4-8 weeks the CRISS sends the cards and a federal report back to ETP for review.

6. Once a criminal background report has been obtained, MSUB will mail to you a report verification indicating if the report was received with no areas of concern, area(s) of concern not likely to affect licensure or serious area(s) of concern that may negatively affect program admission/continuation or licensure.

7. If a report reveals a criminal background the student will be notified by letter by Jennifer Burns, Licensure Officer for MSU Billings, advising the candidate of the date the report will be reviewed by the College of Education Educator Preparation Program Appeals Committee.

8. The Educator Preparation Program Appeals Committee will review and make a recommendation to the Dean of the College of Education for or against being admitted to/continuing in a COE program. The student will be notified of the final decision regarding his/her appeal.
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. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

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.

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

Updated 9/9/2013
Applicant Rights and Consent to Fingerprint

As an applicant who is the subject of a national fingerprint-based criminal history record 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.

- You must be provided written notification by Montana State University Billings that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- 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 information in the criminal history record.⁹

You have the right to expect that officials receiving the results of the criminal history record check will use it only for 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.¹⁰

If agency policy permits, the officials may provide you with a copy of your FBI 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 obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at http://www.fbi.gov/about-us/cjis/background-checks.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged 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.

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at dojitsdpublicrecords@mt.gov or 406-444-3625.

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency.

Signed:

_____________________________________________  ____________
Name                                                                 Date

⁸Written notification includes electronic notification, but excludes oral notification.
⁹See 28 CFR 50.12(b).
¹⁰See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).
In accordance with federal law regarding notices and disclosures, MT Dept of Justice requires the entity to which you are applying to work or volunteer to use this form.

**Form number APR&CF 20170213**

NCPA/VCA Applicants

To: 

Applicant Name

You have applied for employment with, will be working in a volunteer position with, or will be providing vendor or contractor services to Montana State University Billings for the position of (please be specific).

List one: Field Experience, Practicum, Internship, or Student Teaching

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act (VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

1. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).

2. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.

3. Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

Your Name: 

First Middle Maiden Last

Date of Birth: 

Address: 

City State Zip

☐ I have been convicted of, or am under pending indictment for, the following crimes [include the dates, location/jurisdiction, circumstances and outcome]:

☐ I have not been convicted of, nor am I under pending indictment for, any crimes

☐ I authorize Montana Department of Justice, Criminal Records and Identification Services Section to disseminate criminal history record information to Montana State University Billings.

Signature of Applicant Date
Self-Disclosure and Informed Consent

Student Name: ____________________________

(please print name clearly)

Student ID #: ____________________________ Last Four Digits of Social Security Number: __________________

Section 20-4-11 of Montana Code Annotated (Montana School Law) gives the Board of Public Education the authority to suspend, revoke or deny licensure of any person who (A) has been convicted of a crime more serious than a traffic violation, (B) makes any statement of material fact in the application for a license which the applicant knows to be false, (C) has been denied, had revoked, suspended, or has surrendered a teacher or specialist license or certification in another state, or (D) is guilty of immoral conduct related to the teaching profession.

A “yes” answer on one or more of the questions that follow will not necessarily eliminate you as a candidate for a Montana teacher licensure, ABA internship, or for the School Counseling Program. This form is designed to serve as an initial screening device to identify candidates from whom further information is needed. Your signature must be notarized.

Yes  No  1. Have you ever been arrested or convicted of a misdemeanor other than a traffic violation?

Yes  No  2. Have you ever been arrested, indicted, or convicted of a felony charge?

Yes  No  3. Have you ever been denied admission to a teacher education program?

Yes  No  4. Have you ever been removed from a teacher education program?

Yes  No  5. Have you ever had a teaching certificate denied or revoked in any state?

If you respond “Yes” to questions 1-5 above, you must complete one disclosure-of-information form per incident.

Yes  No  6. I acknowledge that I am to immediately disclose any new criminal arrest(s) and/or conviction(s) that occur after the notarized date on this document. Failure to do so may result in delay of program completion or removal from the program.

Oath:

I attest that the responses I have made to the above questions are true statements and I understand that falsification may be considered sufficient cause for my removal from the educator preparation program or ultimate denial of my teaching license. I understand that a federal background check is required for admission to the Educator Preparation Program, ABA, or School Counseling Program at Montana State University Billings. All information I have provided is accurate and I give the College of Education the right to verify that information through a criminal background check (both state and federal). I understand that the results of the background check could lead to denial to admission and/or denial to participate in any field experiences. I give my permission to the College of Education to disclose the results of the criminal background check with other educational institutions, law enforcement agencies, courts, state departments and/or agencies as deemed appropriate by the College.

(Sign in front of a Notary Public)

Applicant’s Signature

______________________________

Date

State of ____________________________

County of ____________________________

Subscribed and sworn to before me this ________ day of ____________________________, 20________

______________________________

Notary’s Signature
Disclosure of Information Form  
*Arrests, indictments, and/or convictions*

<table>
<thead>
<tr>
<th>Legal Name (at time of arrest)</th>
<th></th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Age (at time of arrest)</th>
<th>Date of arrest</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Location of arrest</th>
<th>Town/City</th>
<th>County</th>
<th>State</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Arresting Agency (circle one)</th>
<th>City Police Department</th>
<th>County Sheriff’s Office</th>
<th>Tribal Police</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>Charge(s)</th>
<th></th>
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</table>

<table>
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<tr>
<th>Name of Court</th>
<th></th>
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</table>

<table>
<thead>
<tr>
<th>Court Action (circle one)</th>
<th>Convicted</th>
<th>Deferred</th>
<th>Suspended</th>
<th>Dismissed</th>
<th>Other</th>
</tr>
</thead>
</table>

In the space below provide a full description of the circumstances of the arrest and court action. If additional space is needed, attach a word-processed document of explanation.
**Disclosure of Information Form**

*Removal from a teacher education program*

*Denial of admission to a teacher education program*

*Denial or revocation of a teaching license*

<table>
<thead>
<tr>
<th>Legal Name</th>
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<thead>
<tr>
<th>University and/or State (license revocation)</th>
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<table>
<thead>
<tr>
<th>Date of removal, denial, or revocation</th>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

In the space below provide a full description of the circumstances of the removal, denial, or revocation. If additional space is needed, attach a word-processed document of explanation.

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Version 7/17/2019