ATEAM NSCHC Consent

ATEAM AmeriCorps Getting Things Done

I,__________________________________(*PRINT NAME*), understand that participation in national service requires a candidate to undergo a National Service Criminal History Check process, or NSCHC. My signature below affirms my willing consent for ATEAM to conduct searches, using my legal name, of required criminal history components[1]. Further, I attest that the information contained herein is truthful, and acknowledge that receiving a formal offering to participate in national service is contingent on results of the NSCHC.

I accept that, per the National Service Act, a component result with any criteria below renders me ineligible for service:

1. Being registered, or being required to be registered, as a sex offender
2. Being convicted of murder

I accept that making a false statement concerning my criminal history also renders me ineligible for service.

YOU HAVE THE RIGHT TO REFUSE TO UNDERGO AN NSCHC PROCESS. IF CHOOSING TO DO SO, PLEASE SIGN BELOW:

I refuse to undergo an NSCHC process, and accept that I will be ineligible for service: __________________________

I accept that, per ATEAM determination, a component result with any criteria listed below renders me unsuitable for service:

1. Being convicted of a drug offense
2. Being convicted of a violent offense, per KRS 17.165
3. Any felony offense
4. Being listed in the Cabinet for Health and Family Services' Child Abuse and Neglect Central Registry, or CAN Check
5. Any other conviction determined by ATEAM to have a reasonable relationship to a candidate's ability to perform service

I approve this Consent to apply for any future NSCHC processes required. I also consent to ATEAM's sharing component results (*as allowed by law*) with a host site, understanding that refusing to do so may jeopardize site placement.

Verification of Identity

I authorize ATEAM to make an electronic and/or photographic copy of my government-issued photo identification (ID).

Aliases / **Maiden** / Nickname(s): ____

For ATEAM Staff Only

Legal Name: (Please provide your ID to ATEAM Staff to make a copy for verifying the information below)

FIRST LAST

Social Security Number (*optional*): ___ - __ - ____

ID Number:

State of Residence Declaration

When you **applied** for service or work:

1. Did you live in the United States? ☐ **YES, go to question 2** ☐ **NO[2], go to question 3**
2. Are you currently enrolled as a full-time college student? ☐ **YES[2], go to question 4** ☐ **NO, go to question 5**
3. What was the last State in which you lived before leaving the United States? ***ANSWER IN THE SPACE BELOW***
4. For the purpose of attending school, where do you live? ***ANSWER IN THE SPACE BELOW***
5. Where do you live?

________________________, ________________________

CITY STATE

Opportunity to Dispute

Applicant Notification and Record Challenge: If required, ATEAM may acquire your fingerprints to check the criminal history records of the FBI. You have the opportunity to challenge the factual accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR § 16.34, and are also available on the FBI website, https://fbi.gov.

You also have the right to challenge the factual accuracy of any results that ATEAM determines as a factor rendering you ineligible or unsuitable for participation in a national service program.

______________________________________ _____|_____|_____

CANDIDATE SIGNATURE DATE

______________________________________ _____|_____|_____

CERTIFIED ATEAM STAFF SIGNATURE DATE

Shannon Bailes

CERTIFIEDATEAMSTAFFPRINTEDNAME

For ATEAM Staff Only

Level of Access Determination

The position involves:

- ☐ Recurring Access
- ☐ Episodic Access
- ☐ No Access

to vulnerable populations

[1] NSCHC components depend on a position's level of access to a vulnerable population, and can include:

A) A search of the NSOPW, **B)** a Kentucky State Check, **C)** an FBI Check, and if required **D)** a State of Residence Check

[2] Requires documentation demonstrating proof of foreign residency, or enrollment in a qualified Kentucky school, respectively