

UTAH BUREAU OF CRIMINAL IDENTIFICATION
3888 W 5400 S – Box 148280
SALT LAKE CITY, UT 84114-8280
(801) 965-4448 (Name/DOB) or (801) 965-4569 (Fingerprints)
REQUEST FOR CRIMINAL HISTORY INFORMATION FOR CASE/CUSTODY OF CHILDREN OR ADULTS
EMPLOYMENT OR VOLUNTEER PURPOSES

Waiver	
Salt Lake County Utah State University Extension	

Qualifying Entity	
2001 S State St #S1200 Salt Lake City UT 84190-2350	

Address	

<p>By signing this form, I authorize the Utah Bureau of Criminal Identification (BCI) to access and review state and federal criminal history records and make reasonable efforts to determine whether I have been convicted of, or are under pending indictment for, a crime that bears upon my fitness to be employed or volunteer for a position of trust over children, vulnerable adults or persons with disabilities and convey that determination to the qualified entity. Utah BCI shall make reasonable efforts to respond to the inquiry within 15 business days.</p> <p>I do hereby release Utah BCI, all person, organizations, or government agencies, from any damages of, or resulting from, furnishing such information.</p> <p>I have been provided with a copy of this form. I have read and understood the foregoing and my certification is true and correct to the best of my knowledge and belief.</p>	
_____	_____
Prospective Employee/Volunteer Signature	Date
_____	_____
Qualifying Entity Representative Signature	Date

First Name _____ Middle Name _____ Last Name _____ M/F _____ SS#: _____
 Date of Birth _____

DR LIC #UT _____ FORMERLY USED LAST NAMES _____

ADDRESS & ZIP CODE _____

_____ DATES & STATES you have LIVED IN OTHER THAN UTAH