

EdAdvance's Fingerprint Requisition Form for District Staff Employee

Litchfield Office
355 Goshen Road
P.O. Box 909
Litchfield, CT 06759-0909
Phone: 860.567.0863

Danbury Office
4 Mountainview Terrace
Suite 201
Danbury, CT 06810
Phone: 203.791.1904

www.edadvance.org



Effective July 1, 1994, Public Act 94-221 requires that all newly hired employees of school districts be fingerprinted for a criminal history check, regardless of their position. Under Connecticut General Statute 10-221(d) district staff must be fingerprinted again each time they change school districts.

Substitute teachers will be continuously employed by such local or regional board of education as long as they are employed at least one day of each school year by such local or regional board of education.

Need to Make a Fingerprint Appointment?

Call EdAdvance:

To make a fingerprint appointment at our Litchfield or Danbury location, you may call our Litchfield office 860.567.0863 to schedule an appointment in Litchfield or call our Danbury office 203.791.1904 to schedule an appointment in Danbury. Both offices are open Monday – Friday between the hours of 8:30 am – 4:30 pm.

District Staff:

What Do I Need to Bring to My Fingerprint Appointment?

- Certified Bank Check or Money Order in the amount of **\$12.00** (FBI fee) made payable to EdAdvance and this completed form. **NOTE:** Cash, Credit Card, Debit Card or Personal Checks will **NOT** be accepted.
- Government-issued photo ID, such as a driver's license or passport, social security number, your birth date and place of birth.
- A completed, dated & signed copy of the **Criminal History Record Information Requisition Form** with the appropriate box "checked off" on page 2. **Only** your school district(s) can complete and provide you with this form.

SCHOOL PERSONNEL (Please check appropriate box):

- Please bill our school district for EdAdvance's discounted processing fee of **\$16.00 only**. (Checking this box will apply only if district staff employee brings payment of **\$12.00**, as reflected in the 1st bullet above.
- Please bill our school district for EdAdvance's **FULL** fingerprint expense of **\$28.00** (\$12.00 FBI fee + \$16.00 EdAdvance's discounted processing).

Applicant's Name: _____

Position: _____

School District Name: _____ Date: _____

Authorized by: _____

Authorized Signature: _____



EdAdvance is an equal opportunity provider and employer.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Washington, DC 20250-9410.