

EdAdvance's

Fingerprint Requisition Form

for a **CONTRACTOR** Hired by a School District

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 **December 1, 2017** the State Fee increased from \$50 to **\$75** to fingerprint a contracted worker from a private company, under the statutes Adam Walsh Child Protection Act & Safety Act Paid Contractor "AWA PAID Contractor" OR National Child Protection Act/Volunteers for Children's Act "NCPA/VCA PAID Contractor".
The FBI Fee is still \$12.

Need to Make a Fingerprint Appointment?

Call EdAdvance:

If you would like 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



CONTRACTOR:

Please bring with you:

- Certified Bank Check or Money Order in the amount of **\$87** (\$75 State fee + \$12 Federal fee for a Contractor) 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, birth date and place of birth.
- A copy of the **Criminal History Record Information Requisition Form** for a contractor with the appropriate statute box "checked off" on page 2. Your school district will complete, date & sign and provide you with this form..
- A letter, dated & signed, from your school district on their letterhead indicating your date of hire, your position with authorized statute, NCPA/VCA or AWA.

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 the contractor brings partial payment of **\$87**, as reflected in the 1st bullet above.)
- Please bill our school district for EdAdvance's **FULL** contractor's fingerprint expense of **\$103** (\$75 State fee + \$12 Federal fee + \$16.00 EdAdvance's discounted processing).

Contractor's Name: _____

Position: _____

School District Name: _____ Date: _____

Authorized by: _____

Authorized Signature: _____



