

То:	Clinical Mental Health Counseling Graduate Students		
From:	Susan Hamton Susan Thornton, EdD, LPC-S, NCC, RPT-S, LPP Instructor/Clinical Coordinator, Clinical Mental Health Counseling Program		
Re:	Required Background Check Policy		

Policy

Prior to enrollment in Clinical Practicum (RDCO 590), students are required to complete a background check. It is the student's responsibility to complete the necessary documents, pay the required fee and returned the certified copy of your criminal history information record to the Clinical Coordinator of the Clinical Mental Health Counseling Program.

Procedure

To obtain a certified copy of your criminal history information record, pursuant to Louisiana Revised Statute 15:588, Right of Individual Access:

- Complete the Right to Review Authorization Form and Right to Review Disclosure Form.
- Take the completed Right to Review Authorization Form and Right to Review Disclosure Form to Louisiana State Police Headquarters, located at 7919 Independence Boulevard, Baton Rouge, LA 70806.
- Pay the required fee of \$36, by two separate payments in the amount of \$26 and \$10. Acceptable forms of payment include cashier's check, money order or credit card when paying in person at Louisiana State Police Headquarters.
- Undergo the background check/fingerprinting process and wait to receive a certified copy of the criminal history.
- Submit the certified criminal history report to the Clinical Coordinator of the Clinical Mental Health Counseling Program.

APPLICANT PROCESSING - DISCLOSURE FORM

Louisiana Bureau of Criminal Identification and Information

P.O. BOX 66614 (Box A-6) BATON ROUGE, LA 70896

RIGHT TO REVIEW

NAME					
ADDRESS					
CITY	STATE	ZIP COD	DE		
DATE OF BIRTH		E OF BIRTH STATE)	RACE	SEX	WEIGHT
HEIGHT	HAIR	COLOR	EYE CO	DLOR	
SOCIAL SECURITY	NUMBER				

DO NOT WRITE BELOW THIS LINE: {For Bureau of Criminal Identification and Information Use Only}

NOTICE: The response to your request for a criminal history check is based on a review of the State of Louisiana's criminal history records database as is available at the time of request. This does not preclude the possible existence of conviction information not available in our database.

CRIMINAL HISTORY DETERMINATION:

□ RAPSHEET ATTACHED

□ RESPONSE BELOW

For BOI Office Use Only		
ATN#		
SID#		
TIME F/P COMPLETED		
TIME DESC.COMP		

FEES

\$10.00 Fingerprint Fee (if printed at LSP Headquarters)

\$26.00 Processing Fee (required whether printed at LSP Headquarters or when mailing in two fingerprint cards)

RIGHT TO REVIEW

Louisiana State Police Bureau of Criminal Identification and Information P.O. Box 66614 - Box A-6 Baton Rouge, LA 70896

When submitting fingerprints:

In person: two separate money orders, cashier checks, business checks for \$10 and \$26 or a credit card

By mail: include two FBI (form FD-258) fingerprint cards and a \$26 money order, cashier check or business check

****PLEASE TYPE or PRINT****

APPLICANTS FULL NAME:

LAST	FIRST	MIDDLE
STREET ADDRESS:		
COMPL	ETE STREET ADDRESS TO I	NCLUDE APARTMENT/LOT #
CITY:	STATE:	_ZIP CODE:
PHONE NUMBER:		
SOCIAL SECURITY NUMBER:	D <i>f</i>	ATE OF BIRTH:
DRIVERS LICENSE OR ID NUM	BER <u>:</u>	_STATE OF ISSUE <u>:</u>
RACE:SEX:		

APPLICANTS SIGNATURE: _

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above. Pursuant to Title 28, C.F.R. Section 16.34, officials making the determination of suitability for licensing or employment shall provide the opportunity to complete, or challenge the accuracy of, the information contained in the state or FBI identification record.

**Electronically submitted fingerprints obtained at LSP Headquarters after 3:30 will be available for pickup the next business day.