

INSTRUCTIONS FOR COMPLETION OF REQUEST FOR
CRIMINAL HISTORY RECORD INFORMATION

PARTS I AND IV

TYPE OR PRINT LEGIBLY WITH BALL - POINT PEN.

PARTS I AND IV ARE TO BE COMPLETED BY THE REQUESTER ON EACH AND EVERY INDIVIDUAL THEY DESIRE TO HAVE CRIMINAL HISTORY RECORD INFORMATION ON.

AFTER COMPLETION, FORWARD BOTH COPIES WITH THE CARBON INTACT TO:

DIRECTOR, RECORDS AND IDENTIFICATION DIVISION
1800 ELMERTON AVENUE, ATTN: CENTRAL REPOSITORY,
HARRISBURG, PA. 17110.

NONCRIMINAL JUSTICE AGENCIES AND INDIVIDUALS MUST
INCLUDE A CHECK OR MONEY ORDER IN THE AMOUNT OF
\$10.00 PAYBLE TO "COMMONWEALTH OF PENNSYLVANIA"
FOR EACH REQUEST.

NOTE: NONCRIMINAL JUSTICE AGENCIES AND INDIVIDUALS
WILL ONLY RECEIVE A COPY OF THE "RAP SHEET"
IF ANY RECORD IS IN FILE.

PART II

PART II IS TO BE COMPLETED BY A CRIMINAL JUSTICE AGENCY THAT REQUESTS CRIMINAL HISTORY RECORD INFORMATION ON AN INDIVIDUAL.

PART III

PART III IS TO BE COMPLETED BY A DESIGNATED EMPLOYEE OR OFFICER OF THE PENNSYLVANIA STATE POLICE, CENTRAL REPOSITORY.

PENNSYLVANIA STATE POLICE
REQUEST FOR CRIMINAL HISTORY RECORD INFORMATION
(SEE REVERSE SIDE FOR INSTRUCTIONS)

TYPE OR PRINT ONLY

PART I TO BE COMPLETED BY REQUESTER		DATE OF REQUEST
NAME (Last)	(First)	(Middle)

MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NO.	DATE OF BIRTH	SEX	RACE
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REQUESTER IDENTIFICATION

CRIMINAL JUSTICE AGENCY - FEE EXEMPT NONCRIMINAL JUSTICE AGENCY - FEE EXEMPT

INDIVIDUAL - NONCRIMINAL JUSTICE AGENCY - \$10 FEE ENCLOSED

REASON FOR REQUEST

CRIMINAL INVESTIGATION INDIVIDUAL ACCESS AND REVIEW BY SUBJECT OF RECORD OR LEGAL REPRESENTATIVE

CRIMINAL JUSTICE EMPLOYMENT NONCRIMINAL JUSTICE EMPLOYMENT

COURT REQUEST ON PRIOR ARD OTHER (Specify) _____

PART II TO BE COMPLETED BY CRIMINAL JUSTICE AGENCIES ONLY

INFORMATION REQUESTED

RAP SHEET PHOTO FINGERPRINTS PRIOR ARD

STD NO. (If available) OTN OR OCA NO. (If available)

PART III FOR CENTRAL REPOSITORY USE ONLY (LEAVE BLANK)

INFORMATION DISSEMINATED

NO RECORD OR NO RECORD THAT MEETS DISSEMINATION CRITERIA

RAP SHEET FINGERPRINTS PHOTO

SID NO. _____

INQUIRY BY _____ DISSEMINATION BY _____

THE INFORMATION FURNISHED BY THE CENTRAL REPOSITORY IS SOLELY BASED ON THE FOLLOWING IDENTIFIERS THAT MATCH THOSE FURNISHED BY THE REQUESTER:

SID NO. DATE OF BIRTH RACE

OTN/OCA NO. MAIDEN NAME SEX

NAME SOCIAL SECURITY NO. ALIAS

Director, Central Repository

Response based on comparison of requester furnished information and/or fingerprints against a name index and/or fingerprints contained in the files of the Pennsylvania State Police Central Repository only, and does not preclude the existence of other criminal records which may be contained in the repositories of other local, state or federal criminal justice agencies.

PART IV TO BE COMPLETED BY REQUESTER

NAME OF INDIVIDUAL MAKING REQUEST _____

REQUEST TO BE MAILED TO:

NAME
ADDRESS
CITY STATE ZIP CODE

LIST TELEPHONE NO. TO BE USED IN CASE OF PROBLEM:

INCLUDE AREA CODE

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