



October 01, 2009

THESE ARE INSTRUCTIONS FOR COMPLETING THE STATE & FBI ELECTRONIC FINGERPRINT CARDS IN ORDER TO OBTAIN YOUR CRIMINAL HISTORY RECORDS CHECK (CHRC).

PLEASE READ ALL INSTRUCTIONS CAREFULLY. FAILURE TO FOLLOW THE INSTRUCTIONS WILL LEAD TO DELAY OF TESTING, CERTIFICATION, OR LICENSURE. IT IS THE APPLICANTS RESPONSIBILITY TO ASSURE THAT THE CORRECT INFORMATION IS RECEIVED.

CJIS Approved Commercial Fingerprinting Services

Private Fingerprint Providers/Mobile Units – May come to your facility when contacted directly by you. Please use the Private Fingerprint Providers before contacting CJIS or MVA sites  
The cost of fingerprints may vary from site-to-site

1. Private Fingerprint Providers/Mobile Fingerprint Units

**All American Protective Services, LLC**  
 2275 Research Blvd, Suite 500  
 Rockville, MD 20850  
 Telephone: 301.296.4499 x1182

[www.mdfingerprint.com/](http://www.mdfingerprint.com/)

**Harborview Investigations**  
 308 Crain Highway, NW, Suite 201  
 Glen Burnie, MD 21061  
 Telephone: 410-761-6700

[www.marylandfingerprinting.com](http://www.marylandfingerprinting.com)

**Mid-Atlantic Regional Investigations, LLC**  
 1202 West Street  
 Annapolis, MD 21401  
 Telephone: 888-320-7775

<http://www.marinvestigations.com/>

**Apex Investigative Services**

1916 Crain Hwy S. Ste 11  
 Glen Burnie, Md. 21061  
 Phone: 410-590-3700

[www.apex-investigations.com](http://www.apex-investigations.com)

**Inquiries, Inc.**  
 129 N. West Street  
 Easton, MD 21601  
 Telephone: 866-987-3767

[www.inquiriesinc.com](http://www.inquiriesinc.com)

**Grand Mission Consult**

7515 Annapolis Rd #203  
 Hyattsville, MD 20784  
 Telephone: 866-454-6282

[www.grandmissions.com/fingerprint.html](http://www.grandmissions.com/fingerprint.html)

**L-1 Enrollment Services**  
 Multiple Locations  
 Call for an appointment  
 Telephone: 877-467-9215  
[www.ibtfingerprint.com/](http://www.ibtfingerprint.com/)

2. CJIS Electronic Fingerprinting Site – 410-764-4501 / 1-888-795-0011 (toll free)

Baltimore City: Central Repository (CJIS) (Home Depot side of Reisterstown Plaza on the Appleby's end of the mall. The Board of Nursing is located on the same side at the opposite end of the mall.)  
 6776 Reisterstown Road, Suite 102,  
 Baltimore Maryland 21215,

*No appointment Necessary*

*8:30a.m. to 5p.m. Monday, Tuesday, Wednesday, & Friday.*

*8:30a.m. to 6:30p.m. Thursday*

*8:30a.m. to 4:30 p.m. 1<sup>st</sup> and 3<sup>rd</sup> Saturdays of each month*

*(Please Call or Check web-site for additional times and locations)*

<http://www.dpsscs.state.md.us/publicservs/fingerprint.shtm/>

3. Additional Sites for Electronic Fingerprinting

*All MVA Site locations are open from 8:30 am to 4:00 pm. **BY APPOINTMENT ONLY***

*You may call the CJIS Customer Service Desk to make appointments between the hours of 8 & 5pm.*

*Mon. through Fri. 410-764-4501 or 1-888-795-0011*

*The cost is \$20 for fingerprinting plus the cost of the record check at these locations*

Bel Air

501 West MacPhail Rd.  
 Bel Air, Md. 21014

Frederick

1601 Bowman's Farm Rd.  
 Frederick, Md. 21701

Glen Burnie

6601 Ritchie Hwy. N.E.  
 Glen Burnie, Md. 21062

Salisbury

251 Tilghman Road  
 Salisbury, Md. 21801

Waldorf

11 Industrial Park Drive  
 St. Charles Business Park  
 Waldorf, Md. 20602

**INSTRUCTIONS FOR COMPLETING THE CRIMINAL HISTORY RECORD CHECK (CHRC)**  
**OVERVIEW**

- All exam candidates must submit to a criminal history check.
- You will not receive authorization to test (ATT) for licensure exam (NCLEX) until you have submitted to the Board verification of having initiated the criminal history records check. If the verification is not received with the application, you will not be released to take the examination until the Board receives, reviews, and enters both criminal history records reports.
- Your license/certification will not be issued until the criminal history record check is received, reviewed, and approved by the Board.
- Type or print all information in black ink. Do not sign the cards until you are directed to do so by the person obtaining the prints.

**OBTAINING FINGERPRINTS and FEE:**

- Results are returned faster to the Board if the fingerprints have been done electronically. Please see insert referencing the electronic fingerprints. When you get your fingerprints done, you will receive a printed verification form with your name, date of print, transaction/reference number and signature of person taking print. **Submit the printed verification with your application.**

If your fingerprints are **REJECTED**, the Board will mail to you the report indicating that the prints were received and rejected by CJIS. Follow the instructions on the letter and send your **REPEAT** prints directly TO CJIS. CALL CJIS WITH **ANY QUESTIONS ABOUT RETURNED CARDS AND REPEAT PRINTS. DO NOT RETURN THE REPEAT CARDS TO THE BOARD OF NURSING**

**VERIFICATION THAT ELECTRONIC FINGERPRINTS WERE TAKEN:**

ALL electronic receipt(s) must have the:

- a. Applicant's name; and
- b. Date and transaction/reference number
- c. Signature of the person taking the fingerprints.

**WHAT MUST BE SUBMITTED TO THE BOARD:**

You must submit the printed verification with your application if you expect a temporary license, a 90-day letter, or to promptly be allowed to sit for the NCLEX. **(THERE IS NO TEMPORARY LICENSE FOR AN NCLEX APPLICANT)**

If in doubt, check the FAQs on the Board's website under criminal history record checks. THEN if there are further questions or concerns, call Dorothy Haynes 410-585-1952.

**When receipt of the verification of having fingerprints taken comes with your application, and the application is complete, the Board will issue, as appropriate:**

1. An Authorization to Test (ATT) for the NCLEX examination applicants;
2. A Temporary License to work as an RN/LPN for 90 days to eligible endorsement applicants; or
3. A 90-day Letter to work as a Certified Nursing Assistant to eligible CNA applicants.

If you do not send the printed verification of CHRC in with your application, together at the same time, you will **not** receive a temporary license or 90-day letter. You will need to wait until all the criminal history records reports are received, reviewed, and approved by the Board to test for the NCLEX examination or to receive your license or certificate. **DO NOT SEND THE RECEIPT IN SEPARATELY.**

## INSTRUCTIONS FOR COMPLETING THE ELECTRONIC FINGERPRINT

1. Results are returned faster to the Board if the fingerprints have been done electronically. Please see attached paper insert (last page) referencing the electronic fingerprints. When you get your fingerprints done, you will receive a printed verification form with your name, date of print, transaction/reference number and signature of person taking print. **Submit the printed verification with your application.**
2. For CJIS Customer Service Desk call 410-764-4501 or 1-888-795-0011; 8a to 5p Monday - Friday.
3. Be sure to take the attached paper insert (last page) and **at least one** of the following proper forms of identification with you. Documents must be current.
  - Maryland driver's license
  - Another state or country driver's license
  - Passport
  - Certificate of U.S. citizenship
  - Alien registration card
  - Identification card issued by a state or local governmental agency, the District of Columbia, a United States territory, or a foreign government.
4. Pay the fee and have your fingerprints taken. Get an electronic printed receipt to attach to your application to the Board.
5. **Completing the State (lavender) card.**
  - Fill in the card prior to fingerprinting - your signature will be obtained by the fingerprinter at the fingerprint location. **(DO NOT FORGET TO SIGN THE CARD)**
  - Fill in your name and address – this information will be used in the event that your fingerprint cards are rejected and need to be returned to you.
  - Fill in your birthday (e.g. month/day/year 05/27/1988 -all four digits for the year)
  - Place of birth- state or country
  - Citizenship- country
  - Height and weight- do not use fraction of inches or pounds
  - Race codes:
    - I - American Indian or Alaskan Native
    - A - Asian or Pacific Islander
    - B - African American
    - W - White (including Hispanic/Latino)
    - O - Other
  - Gender/Sex- "F" for female; "M" for male
  - Eyes/hair- color of your eyes and hair
  - SS# or work visa number - if you do not have one, enter zeros (000 00 0000); **do not** use a tax ID number
  - Maryland driver's license - write in your Maryland driver's license number. If you do not have a Maryland driver's license, write in N/A
  - Leave the position applied for blank
  - On right hand side of the form, unless already checked, check boxes: (a) State and FBI and (b) Governmental licensing or certification
  - Do not fill out the disclosure section.
  - On either card, if you fill in something you were told not to fill in, draw a single line through it and send in the cards. Fill cards in fully and accurately or they will be rejected by CJIS and returned to the address provided on the card. If you do fill it out in error, send in the completed printed card anyway.
6. **Completing the FBI (blue print) card.**
  - Fill in your name and address (residence of person fingerprinted)
  - Fill in personal identifying data the same way as on the lavender card (date of birth, country of citizenship, sex, height, weight, eye and hair color, place of birth). **Write** in your race- **do not use the abbreviation that you use on the lavender card**
  - Fill in armed forces number, SSI#, and Miscellaneous #, only if appropriate.
7. **Write down the reference number** (located in the left hand corner of the lavender form). If the criminal history records check is not received in this office, **you** will need to track the results. Your license/certificate will not be issued without the criminal history records check being received, reviewed, and approved by the Board.

8. If you are unable to access electronic fingerprinting, please contact the MBON Exam program electronically at [daversa@dhmh.state.md.us](mailto:daversa@dhmh.state.md.us) or MBON Endorsement program electronically at [cherylesmith@dhmh.state.md.us](mailto:cherylesmith@dhmh.state.md.us) or the MBON C.N.A./C.M.T program electronically at [lbarner@dhmh.state.md.us](mailto:lbarner@dhmh.state.md.us) to request the hard copy of the lavender and blue fingerprint cards. You will need to call your local police barracks for times and locations to have your prints rolled.
9. Do not call the Board to verify receipt of your criminal history records check until:
  - Your application has been at the Board for at least one month, or
  - 5 days prior to the expiration of your temporary license or 90-day letter and you have not received a permanent license/certification number.

If you are waiting for certification, licensure by exam, or licensure or certification by endorsement, you may access the status of your application by accessing the Board's website ([www.mbon.org](http://www.mbon.org)) and click on 'Look-up licensee' link located on the left-hand side of the page. Enter in your last name and the initial of your first name followed by an asterisk (shift/8-keys) and click search or the enter key. In the search results, locate your name and click on the [blue underlined](#) license type

If you have any questions:

- Consult the Board's website for the status of your application, or
- Consult the Board's website for CHRC process questions - located under Criminal History Records Checks link, or
- If you are unable to access your application via the Board's website, or
- If you have questions about the CHRC results, you may contact Dorothy Haynes, Legal Associate and leave the following information (leave your name, telephone number, ssn, transmittal number, and- if your application is at the Board at one of the following:
  - 410-585-1952 or
  - fax 410-358-3530, or
  - [dhaynes@dhmh.state.md.us](mailto:dhaynes@dhmh.state.md.us).

**APPLICANTS REQUIRED TO MAKE DISCLOSURE MUST complete the Statement below.**



STATEMENT OF MARYLAND  
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES

**APPLICATION FOR CRIMINAL HISTORY RECORD CHECK**

**DISCLOSURE**

I, \_\_\_\_\_ (PRINT NAME)  
hereby declare or affirm under Penalty of Perjury, that I

(Check one) →  HAVE  HAVE NOT

been convicted, received a probation before judgment, received a not criminally responsible disposition, & that I

(Check one) →  AM  AM NOT

the subject of pending criminal charges. I further declare or affirm that I am the applicant whose signature appears below.

-READ INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION  
-ONLY ORIGINAL APPLICATION WILL BE PROCESSED  
-TYPE OR PRINT ALL INFORMATION CLEARLY  
-CHECK OR MONEY ORDER (NO CASH) MADE PAYABLE TO:  
CJIS-CENTRAL REPOSITORY  
-MAIL COMPLETED APPLICATION TO:  
CJIS, P.O. BOX 32708, PIKESVILLE, MD 21282-2708  
OR RETURN TO REQUESTING AGENCY  
-FOR ASSISTANCE CALL 410-764-4501

NAME \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

ADDRESS \_\_\_\_\_  
(Number) (Street) (P.O. Box)

DAYTIME PHONE NUMBER \_\_\_\_\_ EVENING PHONE NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_ CITIZENSHIP \_\_\_\_\_  
MM DD YYYY

HEIGHT: FT. \_\_\_\_ IN \_\_\_\_ WEIGHT \_\_\_\_ RACE \_\_\_\_ SEX \_\_\_\_ EYES \_\_\_\_ HAIR \_\_\_\_

† SOCIAL SECURITY NUMBER

MD. DRIVER LICENSE NUMBER

POSITION APPLIED FOR: N/A

AUTHORIZATION NUMBER 9300000850

ATTENTION Maryland Board of Nursing

MAIL REPLY TO: \_\_\_\_\_ (NAME)  
4140 Patterson Avenue

ADDRESS \_\_\_\_\_ (Number) (Street) (P.O. Box)  
Baltimore MD 21215-2254  
\_\_\_\_ (City) (State) (Zip)

† Privacy Act of 1974 (PL. 93-579) applies.

"By submitting your check for payment you are opting into electronic processing. To see more details on this please visit our website at [www.dpsc.state.md.us](http://www.dpsc.state.md.us)"

CJIS-012 (01/08)  
FAST FORMS

- State Only  
 State and FBI  
 State and FBI Volunteer
- CHRI REQUEST TYPE:  
Check Only One
- Adult Dependent Care  
 Attorney/Client Criminal Case #  
 Child Care  
 Criminal Justice  
 Gold Seal Letter/Adoption  
 Gold Seal Letter/Visa  
 Government Employment  
 Government Licensing or Certification  
 Immigration/Visa  
 Individual Challenge  
 Individual Review  
 MSP Licensing  
 Private Employer Petition  
 Public Housing Authority
- Payment Enclosed  
Amount \$ \_\_\_\_\_  
Check or M.O. # \_\_\_\_\_
- Bill Authorization Account (must have approved billing agreement)  
 Indigent (Form must be attached with verification)  
 One FBI fingerprint card enclosed for FBI

<b>APPLICANT</b>	LEAVE BLANK	TYPE OR PRINT ALL INFORMATION IN BLACK	FBI LEAVE BLANK
SIGNATURE OF PERSON FINGERPRINTED		LAST NAME <u>NAM</u> FIRST NAME _____ MIDDLE NAME _____	
RESIDENCE OF PERSON FINGERPRINTED		ALIASES <u>AKA</u>	
DATE _____ SIGNATURE OF OFFICIAL TAKING FINGERPRINTS _____		O R I	MD920480Z MD BD OF NURSING BALTIMORE, MD
EMPLOYER AND ADDRESS		CITIZENSHIP <u>CTZ</u>	DATE OF BIRTH <u>DOB</u> Month Day Year
REASON FINGERPRINTED		YOUR NO. <u>OCA</u>	SEX _____ RACE _____ HGT _____ WGT _____ EYES _____ HAIR _____ PLACE OF BIRTH <u>POB</u>
Maryland Board Of Nursing 4140 Patterson Avenue Baltimore, MD 21215		FBI NO. <u>FBI</u>	LEAVE BLANK
Md. Ann. Code, Health Occ., §§8-303, 8-304		ARMED FORCES NO. <u>MNU</u>	CLASS _____
		SOCIAL SECURITY NO. <u>SOC</u>	REF. _____
		MISCELLANEOUS NO. <u>MNU</u>	