

BACKGROUND CHECK REQUEST (301QED)

This form is to be used to assist in gathering information to be entered into the CRIMS system.

The instructions for the Qualified Entity Designee (QED) are available separately in form MSC 301QED-Instructions.

The instructions for the Subject Individual (SI) are attached to this form and **must** be given to the SI.

Section 1 — To be completed by the QED or the Qualified Entity Initiator (QEI)

1. QED agency name: LCOG - Senior & Disabled Services	
QED agency street address: 1015 Willamette Street	
QED agency City/State/ZIP code: Eugene, OR 97401	
2. QED name: Kristi Carlstrom	QED phone number: 541-682-4348
QEI name (if applicable): N/A	QEI phone number:
3. Application type (select one program area for this position): <input checked="" type="checkbox"/> APD <input type="checkbox"/> DD <input type="checkbox"/> MH <input type="checkbox"/> PLA <input type="checkbox"/> CW <input type="checkbox"/> VR If an ADP, is this application for a skilled position in a nursing facility only? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this position: <input type="checkbox"/> Paid (for example: employee or contractor) <input type="checkbox"/> Non-paid (for example: volunteer, household member in AFH, etc.)	
4. Start date for position (mm/dd/yyyy): _____	
Is this a recheck of the SI in the same position? <input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Position title: <i>Eugene Meals on Wheels Volunteer</i>	
Description of duties:	
6. Position requires direct contact with (select all that apply): <input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Confidential information <input checked="" type="checkbox"/> Seniors (65 years and older) <input checked="" type="checkbox"/> Finances/financial records <input checked="" type="checkbox"/> Secure facilities <input checked="" type="checkbox"/> Information technology systems	
7. Do the duties require driving? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 1 — To be completed by a QED (continued)

8. Type(s) of documents checked to verify identity (*check all that apply*):
 Driver's license or state ID Social Security card Passport
 Other: _____
 Initials of person checking ID: _____

9: Worksite locations/address for this position (*enter all if multiple*):

Section 2 — To be completed by the SI

10. Individual name: (Last/First/Middle)

11. Social Security number (*optional*): 12. Date of birth (*mm/dd/yyyy*):

13. Email address: 14. Gender:
 Female Male

15. Driver's license ID:
 State: Number:

16. Aliases/other names used:

17. Check only if you prefer correspondence be sent to your residential or mailing address (*rather than an email address*).

18. Residence street address:
 City: State ZIP code:

Mailing address: Same as residence
 City: State ZIP code:

19. Home phone: Mobile phone:

20. During the last five (5) years, have you been outside of Oregon for 60 days in a row or more?
 Yes No If yes, complete the following for each residence in the past 5 years:

Date (<i>mm/dd/yy</i>)		City:	State:	Country:	Name(s) used at this residence:
Start:	End:				

Section 2 — To be completed by the SI (continued)

21. Have you ever been charged, arrested and/or convicted of a crime?
 Yes No
 If you answered yes, list all charges, arrests and/or convictions (*adult and juvenile*) and the outcome, regardless of how long ago. Attach additional pages as needed.

Date (mm/dd/yyyy):	Charge, arrest or conviction:	Outcome (e.g., conviction dismissal):	City:	County:	State:

For each arrest, charge or conviction you list, attach extra pages and provide as much information as possible regarding the incident.

If you have potentially disqualifying convictions or conditions, the BCU must consider several factors to determine the risk of vulnerable individuals and your fitness to hold the position. Please provide any information about the details of your criminal history, yourself, your training, education, work history, treatment and circumstances since your criminal history that you want the BCU to weigh. Add additional pages as needed.

I understand that a criminal records check, which may include a national criminal records check requiring fingerprints, will be completed on me. I understand that an abuse check will be completed on me. The BCU may share information with a designee at the facility associated with this request. My submission of this electronic signature authorizes the BCU to request and receive any juvenile, police, court, or investigation reports needed to complete this background check. In the event potentially disqualifying abuse is discovered, I will be notified at the address or email I have given and asked to provide additional information.

I authorize, the BCU to process, this background check request. I understand the background check may be repeated during the time I hold this position.

22. SI signature: _____ Date: _____

Section 3 — To be completed by the QED.

23. Has the SI disclosed any adverse criminal history occurring within the past five (5) years?
 Yes No

If the answer is yes, you MAY NOT hire the SI on a preliminary basis pending the final fitness determination.

If the answer is no, you may hire the SI on a preliminary basis pending the final fitness determination.

SI being hired on a preliminary basis? Yes No

I request an expedited review for hiring on a preliminary basis. The BCU may complete a preliminary fitness determination if fingerprints are required for this SI.

24. The SI has disclosed (*check all that apply*):

- Out-of-state driver's license/state ID card
- Out-of-state residence
- Out-of-state residence within the past five (5) years
- Out-of-state criminal history

If any of the above is checked or if you have reason to believe that the SI's identity needs to be confirmed, fingerprints are required for this SI. If this background check request is submitted without evidence of fingerprint submission, the BCU will reject the request.

- I am submitting one fingerprint card with this background check request.
- The SI is submitting fingerprints via LiveScan.

25. QED signature:

Date:

All documents related to this background check request (*including this form*) should be scanned and attached to the CRIMS record using the **add/edit documents** function on the SI summary page.

Background Check Request Instructions for Subject Individual (SI)

Read all of the instructions before completing the form.

As the subject of this background check, you are referred to in these instructions as the subject individual (SI). The qualified entity (QE) listed in box 1 may be your employer or local branch. The authorized designee (AD) or contact person (CP) has received training from the Department of Human Services Background Check Unit (BCU) for background checks.

Section 2 – You, the SI, completes this section.

10. Type or print your complete name.
11. The disclosure of your Social Security Number (SSN) is optional. The BCU requests the SSN or INS number solely for the purpose of positively identifying you during the background check process. If you do not provide a SSN, the BCU may request fingerprints to confirm identity.
12. Enter your date of birth (mm/dd/yyyy).
13. Enter your email address. The BCU will use your email for any correspondence regarding our background check unless you indicate to use your mailing address (see #17).
14. Check the box for your gender.
15. Enter your driver license or state ID, listing the state and the number.
16. Type or print all aliases or other names you have ever used.
17. Check this box only if you prefer to have correspondence from BCU sent to your mailing address rather than email.
18. Type or print your residence address. If you have a mailing address that is different from your residence, type or print it.
19. Type or print the phone numbers where you can be reached.
20. If you have lived outside of Oregon in the past 5 years for more than 60 days in a row, check the "yes" box and provide details of your previous residences. If you have lived in Oregon for the entire past 5 years, check the "no" box and go to #21.
21. Provide information on your criminal history. If you have never been arrested, charged, or convicted, check the "no" box and go to #22.

Disclose all criminal history – You must accurately and completely disclose all history (*adult and juvenile*) regardless of how long ago it happened. This includes all felonies, misdemeanors, probation violations and failures to appear. If you fail to list any part of your history, your application may be closed or you may be denied due to false statement. Any serious traffic offense such as reckless driving, driving under the influence of intoxicants (DUII) and driving while suspended (DWS), must be listed. Failure to appear, even for a minor traffic violation, must be listed. If you are not sure if something should be listed, you

should list it. For each charge, arrest or conviction, include the exact date (*mm/dd/yyyy*), location and the outcome.

If you do not have proof the charge, arrest, conviction or adjudication has been expunged or set aside then list it.

Violations. Minor moving and non-moving traffic violations are not required to be listed.

If you have criminal history, BCU will weigh several factors to decide if you are fit for the position for which you are applying. Respond to the following questions. Attach documentation to support your responses.

- What happened leading up to the charge, arrest, conviction or other history?
- List any requirements resulting from each charge, arrest or conviction.
- Describe any treatment, education and training specifically related to your history.
- How is your history relevant to your position?
- Explain how you no longer pose a risk to the physical, emotional or financial well-being of vulnerable people.
- How has your life changed since your history?
- List other information you believe would be helpful in making a decision in this case.

22. Sign and date the form. Return it to the person listed in #2.

Possible outcome of your background check:

- **Approved:** Your background check is approved for the position listed on this form. An approval does not guarantee employment or placement.
- **Approved with restrictions:** Your background check is approved to work but are restricted to a specific client, a specific work site or a set of duties. This decision may be appealed. A restricted approval does not guarantee employment or placement.
- **Denial:** Based on the background check, you are denied. You may not hold the position listed on this form and you must be terminated immediately. This decision may be appealed, but you may not hold the position during the appeal.
- **Case closed:** If you do not provide a complete and accurate disclosure of your criminal history or you do not cooperate with this background check process, your application may be closed without a final decision. There are **no** appeal rights, but you may be able to reapply immediately. If closed, the department will provide you with further information.
- **Ineligible:** Due to ORS (Oregon Revised Statute), 443.004, prohibits individuals from working in certain positions if they have one or more specific convictions. If found ineligible, you may not hold the position listed on this form and must be terminated immediately. You do not have hearing rights. The BCU will provide more information in the email or letter sent to you.

Abuse checks — BCU will also conduct an abuse check on you. Potentially disqualifying abuse includes the following:

- **For ALL subject individuals:** Adult protective services history of physical or sexual abuse or financial exploitation assessed on or after January 1, 2010 for which you were found to be responsible. Abuse information is provided to BCU by the Office of Abuse Prevention and Investigations and the Aging and People with Disabilities (APD) based on severity.

- **For subject individuals associated with private licensed childcaring agencies, child foster homes or child adoptive homes.** Child protective services history held by the Department, regardless of the date of assessment or outcome, for which you were found to be responsible, and include founded or substantiated child protective services reports from states where you lived in the past 5 years.

If potentially disqualifying abuse is found, you will be contacted and asked to provide additional information. Due to its sensitive nature, the information you provide will not be disclosed to your potential employer or QED.

Authority — BCU is authorized by state law, to complete background checks on SIs who work, volunteer or live with individuals who are vulnerable to abuse or mistreatment (ORS 181.534, 181.537, 409.027 and 443.004; OAR 407-007-0200 to 407-007-0370, OAR 943-007-000 to 943-007-0501). Vulnerable individuals include children, senior citizens and individuals with physical disabilities, developmental disabilities or mental illness. A check may be required even if you, the SI, do not have direct contact with vulnerable individuals.

Sources checked — BCU may check information from the Driver and Motor Vehicle Services Division, Department of Corrections, Oregon State Police, Federal Bureau of Investigation and local, state and federal courts. BCU may use information from other criminal justice, corrections and law-enforcement agencies and other state and local government agencies. You may be requested to provide fingerprints for a national criminal records check.

Challenging criminal information — If you want to obtain a copy of your record, or challenge information in the record, you must contact the Oregon State Police, 503-378-3070, extension 330 (*for Oregon criminal records*) or the Federal Bureau of Investigation, 304-625-3878 (*for national criminal records*). You may request a copy of the national FBI report from BCU. Depending on your previous contacts with law enforcement and courts, you may need to contact several sources to find your complete criminal records.

Rechecks — This background check process may be repeated at any time while you work, reside or otherwise continue in this position.

If you have questions or need this form in large print or in a different format, contact the qualified entity listed in section 1, box 1.

Keep these instructions for your records.