

Instructions for completing the Criminal History Record/Sex Offender and Crimes Against Minors Registry Request Form
(Please read the following General Instructions)

PURPOSE OF THIS REQUEST:	Check type of name search(es) requested for Criminal History Search. Dissemination of criminal history records are processed in accordance with Section 19.2-389, <u>Code of Virginia</u> , governing the program for which the search is requested.
NAME TO BE SEARCHED:	Type the full name (last, first middle [no initials] and maiden name (if applicable), sex, race, date of birth, and complete address of person whose name is to be searched against the master criminal name file and/or the Sex Offender and Crimes Against Minors Registry. Note: Signature of person making request is required. Providing the social security number is voluntary; however, it is a screening tool that is used for this request to be processed in a more timely manner. Failure to provide this number may result in an inability to process this request due to multiple records with similar names and demographics. Without this additional identifier, the form may be returned to the requestor unprocessed, and the applicant will be required to submit a set of fingerprints along with this request form to determine if this applicant has a criminal record. Social Security Numbers provided will be used to help identify the proper record and will be used for no other purpose.
NAME AND MAILING ADDRESS OF AGENCY, INDIVIDUAL OR AUTHORIZED AGENT MAKING REQUEST:	Agency, Individual or Authorized Agent Making Request: Your agency identification serves as the mailing label for the State Police to return the search results. This information is also reviewed to ensure requestor is statutorily entitled to use this form to request a criminal name search.
FEES FOR SERVICE:	Indicate the fee for the service requested.
METHOD OF PAYMENT:	Method of Payment: Certified Check, Money Order, Company/Business check, MasterCard or Visa. For charge account: provide charge account number issued by Virginia State Police.

Effective November 1, 2010, the public is hereby placed upon notice that returned checks or dishonored money orders and/or credit card payment denials will incur a handling fee of \$50 in addition to the amount of the original payment. Requesting goods or services will be deemed to be acceptance of these terms. Code of Virginia §2.2-4805.

Mailing Instructions:

Mail to: Virginia State Police
CCRE – Attention: New Form
P.O. Box 85076
Richmond, Virginia 23261-5076