Arkansas Department of Health

Arkansas State Board of Nursing
1123 S. University Ave., #800 • Little Rock, AR 72204
(501) 6-2700 • Fax (501) 686-2714

CRIMINAL BACKGROUND CHECK

CHALLENGES & PRIVACY NOTIFICATIONS

Directions: Read the Criminal Background Check Challenge & Privacy Notifications form. Sign and date the form and keep a copy for your records. Upload the signed form to your nurse portal account. Title the form as follows: LastName.FirstName.CBC Notification form

Arkansas Authorization

The Arkansas State Board of Nursing (ASBN)has statutory Authority for Criminal History Record Information for specific purposes as identified via The *Arkansas Nurse Practice Act* Subchapter 3, Section 17-87-309; Subchapter 3, Section 17-87-312, Criminal Background Checks & the ASBN *Rules* Chapter 2, Section V; and A.C.A. § 17-3-102.

The Federal Criminal Background Check requires that your fingerprints are used to check the criminal history records of the Federal Bureau of Investigation (FBI). Your fingerprints and associated information will not be disseminated outside the receiving department, related agency, or other authorized entity.

Record Challenge

If you elect to challenge the accuracy of the criminal history record information, you may do so by contacting the respective agency below, and it must be done prior to issuance or reinstatement of license. Applicant privacy rights are included herein.

Applicants may challenge the accuracy of a criminal background report and/or obtain a copy as follows:

a. To challenge the accuracy of a criminal background report:
Send challenge to the agency that contributed the questioned information to the FBI. Alternatively, send challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

b. For a copy of an Arkansas criminal history record:
Contact Arkansas Crime Information Center (ACIC) at 501.682.7444 or Arkansas State Police at 501.618.8000.

c. For a copy of an FBI criminal history record:
Submit fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.

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FBI Privacy Act Statement
Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

Note: This privacy act statement is located on the back of the FD-258 fingerprint card.

Acknowledgement
Sign below to indicate that you understand that your personal information and fingerprints will be used to search against criminal identification records from both the Arkansas Crime Information Center (ACIC) and FBI. Further, that you give consent for the conduction of Arkansas and FBI criminal background checks and release of the results to the Arkansas State Board of Nursing.

Note: Process of an application will not occur until receipt of this form.

_____	_____	_____
Printed name of applicant	Signature of applicant	Date