

INSTRUCTIONS FOR COMPLETEING FORMS AND SUBMITTING A FINGERPRINT-BASED CRIMINAL BACKGROUND CHECK.

1. Go to <https://www.hhs.nd.gov/providers/criminal-background-checks> to access required forms.
2. Complete Personal Authorization for Criminal History Record Information Inquiry Form (SFN 829).
 - This form **must be typed**. Handwritten and/or incomplete forms will not be accepted.
 - The requesting agency will be the employer (example: Catholic Charities)
 - Select LCPA as the reason for the background check.
 - Enter your information in the Applicant Information section.
 - YOUR personal email address is required
 - Do not leave any sections blank.
 - Answer questions 1-3.
 - If you answer “yes” to questions 2 or 3, you **MUST** provide information in the box below the questions.
 - Address history – you must provide a full 5-year address history.
 - Begin with your current street address and work backwards. If additional space is needed, please use SFN 829 – Page 2.
 - **If you lived in another state in the past 5 years**, you may need to complete additional authorization forms for out-of-state record requests.
 - Click on the folder for each state you have lived in during the past 5 years.
 - Read the form instructions BEFORE clicking on the form PDF.
 - Print the completed form BEFORE signing and dating the form. **Note: some forms require notary or witness signatures.**
 - Sign, date and print the form. It can also be signed and dated after it has been printed.
3. Complete Criminal History Record Check Request Form (SFN 60688).
 - This form **must be typed**. Handwritten forms will not be accepted.
 - Do not change any information that has been pre-entered into the form.
4. Print a BLANK Fingerprint Identity Verification Form (SFN 836).
5. Schedule an appointment with the Human Service Center in your region to be fingerprinted (see next page for location information). You must print and bring **ALL** forms and a valid government issued photo ID to your appointment.
 - You may be fingerprinted at a law enforcement agency, or any other agency that is authorized to do fingerprinting, however, you must mail your forms and sealed fingerprints to:

ND Department of Health & Human Services
Criminal Background Check Unit
600 E Boulevard Ave, Dept 325
Bismarck ND 58505-0250

HUMAN SERVICE CENTER LOCATIONS AND PHONE NUMBERS	COUNTIES
Northwest Human Service Center – Williston 701-774-4600	Divide, McKenzie, Mountrail, Williams
North Central Human Service Center – Minot 701-857-8500	Bottineau, Burke, McHenry, Mountrail, Renville, Pierce, Ward
Lake Region Human Service Center – Devils Lake 701-477-9050	Benson, Cavalier, Ramsey, Rolette, Towner
Northeast Human Service Center – Grand Forks 701-795-3000	Grand Forks, Nelson, Pembina, Walsh
Vocational Rehabilitation Center – Fargo 701-298-4623	Cass, Ransom, Richland, Sargent, Steele, Traill
South Central Human Service Center – Jamestown 701-253-6300	Barnes, Dickey, Eddy, Foster, Griggs, LaMoure, Logan, Stutsman, Wells
West Central Human Service Center – Bismarck 701-328-8888	Burleigh, Emmons, Grant, Kidder, McIntosh, McLean, Mercer, Morton, Oliver, Sioux
Badlands Human Service Center – Dickinson 701-227-7500	Adams, Billings, Bowman, Dunn, Golden Valley, Hettinger, Slope, Stark