



EMS Personnel Background Check Policy

- A. All applicants for initial EMS certification in West Virginia must obtain a criminal background check, *except*:
1. EMT – Miners.
 2. Individuals that have completed a criminal background check for WVOEMS certification within the previous three (3) years.
 3. Individuals with a verified criminal background check provided to another governmental licensing agency or employer within the previous three (3) years. For example: WV RN Licensing Board, etc.
- B. It is the applicant's responsibility to apply for the criminal background check according to the procedures and directions of this policy.
- C. All background check fees are responsibility of the applicant.
- D. Applicants should apply for criminal background check as early as possible in the education and certification process as:
1. It may take six (6) or more weeks for WVOEMS to receive your criminal background check results.
 2. Temporary certificates will not be issued solely pending receipt of criminal background check results.
- E. Results of criminal background checks must be submitted directly to WVOEMS.
- F. Criminal background check procedure:
1. Go to a local West Virginia State Police detachment, county sheriff's department, local police department or other certified fingerprint personnel to request fingerprinting for *state-required* background check. (*Agencies may charge a fee for completing the fingerprint process in addition to the processing fee below*).
 2. Present a valid photo ID.
 3. Complete a FD 258 fingerprint card for the WV criminal background check (example attached).
 4. Attach WVSP 39 Fingerprint Authorization card addressed to:
WV Office of EMS
350 Capitol St. Room 425
Charleston, WV 25301-3714
 5. Mail these items:
 - a. Completed FD-258 fingerprint card.
 - b. A stamped envelope addressed to WV Office of EMS at the address in F.4.
 - c. A \$20.00 money order or cashier's check payable to the WV State Police addressed to:
WV State Police
Attn: Criminal Records
725 Jefferson Road
South Charleston, WV 25309
- G. WVOEMS will complete these additional background checks on each applicant:
1. U.S. Health and Human Services – Office of the Inspector General's exclusion list.
 2. Sex offender registries.
 3. Child support payment status.
 4. National Healthcare Integrity and Protection Data Bank.

Certification Policy # 2.09.08

Effective Date: 1/1/2009

Approved:

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TYPE OR PRINT ALL INFORMATION IN BLACK

FBI

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APPLICANT

LAST NAME NAM

FIRST NAME

MIDDLE NAME

Doe

Jane

Smith

ALIASES AKA
 WV Office of EMS
 350 Capitol St. Room 425
 Charleston WV 25301

Jane Marie
Smith
DATE OF BIRTH DOBMonth 01 Day 01 Year 1988CITIZENSHIP CIZUnited States

SEX

RACE

HGT

WGHT

EYES

HAIR

PLACE OF BIRTH POBYOUR NO. OCAFW5'2"110BlueBrownCharleston WV

SIGNATURE OF PERSON FINGERPRINTED

Jane J. Doe
 RESIDENCE OF PERSON FINGERPRINTED
100 Butterfield Lane
Charleston, WV 25311
DATE 10-1-08 SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

EMPLOYER AND ADDRESS

FBI NO. FB1

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ARMED FORCES NO. MNU

CLASS

REASON FINGERPRINTED

 SOCIAL SECURITY NO. SOC
000-00-0000
 MISCELLANEOUS NO. MNU

REF.

EMT-B certification

SAMPLE

1. R. THUMB

2. R. INDEX

4. R. RING

5. R. LITTLE

6. L. THUMB

7. L. INDEX

8. L. MIDDLE

9. L. RING

10. L. LITTLE

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY

L. THUMB

R. THUMB

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE
CJIS DIVISION/CLARKSBURG, WV 26306

1. LOOP

APPLICANT

FINGERPRINT AUTHORIZATION
Type or Print ALL Information

WVSP 39
1/03

(Facility Number)

Address of Applicant 100 Butterfield Lane Charleston WV 25311

Certification: I hereby request a record check be made to find any police record on the herein named individual and by submitting this request, I understand that the submitted information will be retained by the West Virginia State Police in the Automated Fingerprint Identification System.

I certify that this is for official business and I am authorizing _____ to obtain any record found.

WV OFFICE of EMS
350 Capitol S/Rm 425
Charleston, WV 25301

(Address)

(Signature)

Jane Doe

OBTAIN CLASSIFIABLE FINGERPRINTS:

USE BLACK PRINTER'S INK.
DISTRIBUTE INK EVENLY ON INKING SLAB.
WASH AND DRY FINGERS THOROUGHLY.
ROLL FINGERS FROM NAIL TO NAIL, AND AVOID SQUAWING FINGERS TO SUP-
BE SURE IMPRESSIONS ARE RECORDED IN CORRECT ORDER.
NOTE IN THE APPROPRIATE FINGER BLOCKS IF APPLICANT IS MISSING ONE OR MORE FINGERS FOR ANY REASON.
IF NOT MISSING, ALL TEN IMPRESSIONS MUST BE PROVIDED WITH SCARS AND DEFORMITIES NOTATED.
IF SOME PHYSICAL CONDITION MAKES IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE
OBTAINED.
EXAMINE THE COMPLETED PRINTS TO SEE IF THEY CAN BE CLASSIFIED, KEEPING IN MIND THAT MOST FINGERPRINTS
FALL INTO THE PATTERNS SHOWN ON THIS CARD (OTHER PATTERNS OCCUR INFREQUENTLY AND ARE NOT SHOWN HERE).

THIS CARD FOR USE BY:

LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT PURPOSES.
OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES AND LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY NOTED ON APPLICABLE STATE STATUTES DO NOT SATISFY THE REQUIREMENT.
FEDERAL GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL STATUTES.
OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKS AND INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF SUCH INSTITUTIONS.

REMARKS:

FINGERPRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND SHOULD BE SUBMITTED FOR FBI SEARCH.
PRIVACY ACT OF 1974 (PL. 93-579) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH DISCLOSURE AND USES WHICH WILL BE MADE OF IT.
IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN ON FACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN APPROPRIATE SPACE.

MISCELLANEOUS NO. - RECORD: OTHER ARMED FORCES NO. - PASSPORT NO. [FP], ALIEN REGISTRATION NO. [AR], PORT SECURITY CARD NO. [PS], SELECTIVE SERVICE NO. [SS] VETERANS' ADMINISTRATION CLAIM NO. [VA].

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