



Office of Human Resources

Southern University and A&M College
JS Clark Annex Building
Baton Rouge, LA 70813

Office: 225-771-2680 Fax: 225-771-5617
Email: HR@subr.edu

VERIFICATION OF FINGERPRINTS
AS OF JANUARY 28, 2022

TO: Louisiana State Police
Bureau of Criminal Identification and Information
FROM: Dawn M. Harris, MBA, MS
Human Resources Director

The following applicant is being considered for employment with Southern University System. Please sign this form verifying that the applicant completed the fingerprint process.

It is the applicant's responsibility to cover the cost of fingerprint submission requirements and pay \$10.00 fee in the form of a money order made payable to Louisiana State Police. The applicant must return this form to Human Resources within two (2) working days.

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_

HR AUTHORIZED REPRESENTATIVE: [Signature]

The above individual has reported to the Louisiana State Police Bureau of Criminal Identification and Information and has been properly fingerprinted by this agency.

\_\_\_\_\_ Date \_\_\_\_\_
Louisiana State Police Criminal Records Representative

THIS APPLICANT MAY BE HIRED CONTINGENT UPON CLEARANCE FROM THE BACKGROUND CHECK RESULTS. THE FAILURE OF APPLICANT TO RETURN THIS COMPLETED AND VERIFIED FORM IN THE TIME NOTED MAY MAKE THE APPLICANT INELIGIBLE FOR EMPLOYMENT.

ATN \_\_\_\_\_

SID# \_\_\_\_\_

APPLICANT PROCESSING – DISCLOSURE  
BUREAU OF CRIMINAL IDENTIFICATION AND  
INFORMATION  
P.O. BOX 66614 (MAIL SLIP A-6)  
BATON ROUGE, LA 70896

Southern University and A&M  
AGENCY, BUSINESS OR INDIVIDUAL NAME

P.O. Box 10400  
MAILING ADDRESS

Baton Rouge LA 70813  
CITY STATE ZIP CODE

**NOTICE:**  
PLEASE PRINT OR TYPE  
INFORMATION, EXCLUDING  
ADMINISTRATORS OR AUTHORIZED  
PERSONS SIGNATURE.

INCOMPLETE FORMS WILL NOT BE  
PROCESSED.

NAME OF APPLICANT DATE OF BIRTH PLACE OF BIRTH RACE / SEX  
(STATE)

WEIGHT HEIGHT HAIR COLOR EYE COLOR

SOCIAL SECURITY NUMBER

ALL INFORMATION RELEASED MUST REMAIN STRICTLY CONFIDENTIAL AND ONLY THOSE  
AUTHORIZED BY LAW TO RECEIVE THIS INFORMATION MAY SUBMIT A REQUEST.

DO NOT WRITE BELOW THIS LINE: (For Bureau of Criminal Identification and Information Use Only)

**NOTICE:** The response to your request for a criminal history check is based on a review of the State of  
Louisiana's criminal history records database as is available at the time of request. This does not preclude  
the possible existence of an arrest or conviction information not available in our database.

<u>DATE</u>	<u>ARRESTING AGENCY</u>	<u>CONVICTION INFORMATION</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUBMIT TO:

Louisiana State Police
Bureau of Criminal Identification and Information
P.O. Box 66614 (Mail Slip A-6)
Baton Rouge, LA 70896

THE FEE FOR PROCESSING A STATE BACKGROUND CHECK IS \$26. FOR FBI PROCESSING, WHERE AUTHORIZED OR REQUIRED, THERE IS AN ADDITIONAL \$13.25 FEE.

Acceptable forms of payment include: Cashier Check, Business Check with pre-printed business name or Money Order
Credit Card payments are accepted when paying in person at Louisiana State Police Headquarters

\*\*FORMS MUST BE FILLED OUT IN INK AND BE REVIEWED BY SUBMITTING AGENCY/INDIVIDUAL FOR ACCURACY\*\*
\*\*\*\*FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION\*\*\*\*

\*\*\*\*PLEASE PRINT\*\*\*\*

Southern University and A&M

AGENCY, FACILITY OR INDIVIDUAL

P.O. Box 10400

MAILING ADDRESS

Mikhale Williams

AGENCY, FACILITY AUTHORIZED REPRESENTATIVE OR INDIVIDUAL

Mikhale Williams (Signature)

SIGNATURE OF AUTHORIZED REPRESENTATIVE/INDIVIDUAL

Baton Rouge

LA

70813

CITY

STATE

ZIP CODE

( 225 ) 771-4500

AGENCY, FACILITY OR INDIVIDUAL PHONE NUMBER

mikhale\_williams@subr.edu

AGENCY OR FACILITY E-MAIL ADDRESS

Request For: (pick one only)

- ALCOHOL BEVERAGE OUTLET
AUTHORIZED AGENCY
BEHAVIOR ANALYST BOARD
BOARD OF EXAMINERS (PSYCHOLOGIST)
BOARD OF EXAMINERS (SPEECH/LANGUAGE PATH. & AUDIO.)
BOARD OF NURSING HOME ADMINISTRATORS
CASA
COURT ORDER ADOPTION
CRIMINAL JUSTICE EMPLOYEE
DAYCARE / WORKING WITH CHILDREN
DENTISTRY BOARD
DEPT. OF AGRICULTURE AND FORESTRY
DEPT. HEALTH AND HOSPITALS
DEPT. OF INSURANCE -- FRAUD DIVISION
DEPT. OF REVENUE (Public Registry of Motion Picture Investor Tax Credit)
DCFS ABUSE/NEGLECT INVESTIGATION
DCFS CARETAKER
DCFS FOSTER/ADOPTIVE
DCFS PERSONNEL
DRUG AND DEVICE DISTRIBUTORS
EMPLOYERS
FIREFIGHTERS
FIRE MARSHAL
GESTATIONAL CONTRACTS
HEALTH CARE PROVIDER (Non Licensed)
JUVENILE DETENTION CENTER
LA BOARD CHIROPRACTIC EXAMINERS
LA PHYSICAL THERAPY BOARD
LA STATE BOARD SOCIAL WORK EXAMINERS
LICENSED PROFESSIONAL COUNSELORS
MEDICAL EXAMINERS
OFFICE OF FINANCIAL INSTITUTIONS
OMVC -- COMMERCIAL DRIVING EXAM ADMINISTER
OMVE -- EMPLOYEE ISSUING COMMERCIAL DL
OMVI -- CONTRACT PROCESS INQUIRY/TRANSACTION
OMVT -- AUTO TITLE COMPANY / PUBLIC TAG AGENT
PHARMACY BOARD
POST SECONDARY EDUCATION
PRACTICAL NURSING
PRIVATE ADOPTION
PRIVATE INVESTIGATORS
PRIVATE SECURITY
PUBLIC HOUSING
REGISTERED NURSING
RELIGIOUS ACTIVISTS
SCHOOL
SUPREME COURT COMMITTEE BAR ADMISSION
TAXI DRIVERS
TESS WINDOW TINT
VOLUNTEER LOUISIANA COMMISSION
WILDLIFE AND FISHERIES
WORKING WITH CHILDREN

APPLICANTS FULL NAME: LAST FIRST MIDDLE
\*\*\*\*PRINT -- USE INK\*\*\*\*

{INCLUDE MAIDEN NAME & PREVIOUS MARRIED NAMES IF APPLICABLE}

APPLICANTS SIGNATURE:

APPLICANTS SOCIAL SECURITY # DATE OF BIRTH: / /

ID or DRIVERS LICENSE # & STATE RACE SEX

POSITION OR LICENSE APPLIED FOR

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above. Pursuant to Title 28, C.F.R., Section 16.34, officials making the determination of suitability for licensing or employment shall provide the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record.