



Ohio FBI Background Check

PLEASE PRINT

Name: _____

Address: _____

City, State, Zip: _____

Have you lived in Ohio for the past 5 years?

Yes

No, (list places of residence):

Date of Birth: _____

SS#: _____

Phone: _____

Agency: _____

Release of Background Check Results

I hereby certify that I have given Secure Check, Inc. permission to obtain all criminal history information pertaining to me in the files of the Ohio Bureau of Criminal Identification and Investigation (BCI &I) and release the information to the appropriate agency.

By placing my fingerprint images on the NATIONAL WebFBI Scanner, I am authorizing BCI &I to release criminal history information about me to Secure Check, Inc. and to the appropriate agency for a period of one year from the date of this transaction. I hereby release Secure Check, Inc., BCI & I and any and all individuals connected therewith from all liability in connection with the dissemination of such criminal history information.

Signature

Date

Mailed No Hit
Authentication #: _____

Data Base: _____
Results Sent: _____