



# MIKE DEWINE

★ OHIO ATTORNEY GENERAL ★

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## REQUEST FOR COPY OF OHIO BACKGROUND CHECK:

PLEASE GIVE THE SPECIFIC REASON FINGERPRINTED OF YOUR LAST BACKGROUND CHECK: \_\_\_\_\_

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

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

SEND BACKGROUND RESULT TO:

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

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

\_\_\_\_\_  
PLEASE CHECK IF YOU WANT YOUR RESULTS SENT TO THE OHIO DEPARTMENT OF EDUCATION FOR TEACHER CERTIFICATION.

Return this letter with your money order, certified check, or company check for \$8.00, payable to Treasurer, State of Ohio.

I hereby certify that I have given the above mentioned person or agency permission to obtain a copy of any arrest or conviction record pertaining to me in the files of the Ohio Bureau of Criminal Identification and Investigation.

**\*REQUIRED:**

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE NUMBER WHERE APPLICANT CAN BE REACHED: \_\_\_\_\_