

CRIMINAL HISTORY SELF DISCLOSURE

Your fingerprints will be submitted to the Arizona Department of Public Safety (DPS) and the Federal Bureau of Investigation (FBI) for a criminal history check. Your self-disclosure on this affidavit and the information provided by your criminal history check will be used, as authorized by Public Law and Arizona Revised Statutes, to help us determine your fitness to have unsupervised access to vulnerable persons. **Your failure to disclose true and accurate information on this affidavit will be sufficient grounds to end your employment or to deny, suspend, or revoke your license and may be referred to the State Attorney General's Office for prosecution.**

Be sure that you go over all three (3) pages of the self-disclosure form with the applicant.

You have the right to obtain a copy of any background check report and challenge the accuracy or completeness of information contained in the report. If you challenge the information, you also have a right to prompt determination as to the validity of your challenge. To obtain a copy of your background check report, contact the DPS Records Unit, ACJIS Division at (602) 223-2222.

YOUR NAME (First, Middle, Last)	DATE OF BIRTH (MM/DD/YY)
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ADDRESS (No., Street, Apt. No., City, State, ZIP)

Check one of the following and provide information as directed:

- I have not been convicted of nor am I under pending indictment for any crimes.
- I have been convicted of or I am under pending indictment for the following crime(s) (provide dates, location/jurisdiction, circumstances and outcome-attach additional pages as needed).

ALSO – Check one of the following and provide information as directed:

- I am not subject to registration as a sex offender in Arizona or in any other jurisdiction.
- I am subject to registration as a sex offender (provide dates, location/jurisdiction, circumstances and outcome-attach additional pages as needed).

I certify that I understand this affidavit. My self-disclosure is true, accurate, and complete to the best of my knowledge.

Your Signature

Date

Notary Public

State of Arizona, County of _____

Subscribed and sworn or affirmed and acknowledged before me this _____ day of _____, 20____

Commission Expiration date

Notary Public's Signature

If you have been convicted of committing, attempting to commit, soliciting, facilitating or conspiring to commit one or more of the following crimes, DPS will deny you a fingerprint clearance card and you **WILL NOT** be eligible to appeal the decision.

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | First or second-degree murder |
| <input type="checkbox"/> | <input type="checkbox"/> | Child abuse |
| <input type="checkbox"/> | <input type="checkbox"/> | Abuse of a vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual abuse |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual abuse of vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | Incest |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual assault |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual exploitation of a minor |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual exploitation of a vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | Commercial sexual exploitation of a minor |
| <input type="checkbox"/> | <input type="checkbox"/> | Commercial sexual exploitation of a vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | Sex trafficking |
| <input type="checkbox"/> | <input type="checkbox"/> | Production, publication, sale, possession and presentation of obscene items as prescribed in section 13-3502 |
| <input type="checkbox"/> | <input type="checkbox"/> | Furnishing harmful items to minors as prescribed in section 13-3506 |
| <input type="checkbox"/> | <input type="checkbox"/> | Furnishing harmful items to minors by internet activity as prescribed in section 13-3506.01 |
| <input type="checkbox"/> | <input type="checkbox"/> | Obscene or indecent telephone communications to minors for commercial purposes as prescribed in section 13-3512 |
| <input type="checkbox"/> | <input type="checkbox"/> | Luring a minor for sexual exploitation |
| <input type="checkbox"/> | <input type="checkbox"/> | Enticement of persons for purposes of prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | Procurement by false pretenses of person for purposes of prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | Child prostitution as prescribed in A.R.S. § 13-3212 |
| <input type="checkbox"/> | <input type="checkbox"/> | Taking a child for the purposes of prostitution as prescribed in A.R.S. § 13-3206 |
| <input type="checkbox"/> | <input type="checkbox"/> | Sexual conduct with a minor |
| <input type="checkbox"/> | <input type="checkbox"/> | Molestation of a child |
| <input type="checkbox"/> | <input type="checkbox"/> | Molestation of a vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | A dangerous crime against children as defined in A.R.S. § 13-604.01 |
| <input type="checkbox"/> | <input type="checkbox"/> | Exploitation of minors involving drug offenses |
| <input type="checkbox"/> | <input type="checkbox"/> | Neglect or abuse of a vulnerable adult |
| <input type="checkbox"/> | <input type="checkbox"/> | Procuring or placing persons in a house of prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | Receiving earnings of a prostitute |
| <input type="checkbox"/> | <input type="checkbox"/> | Causing one's spouse to become a prostitute |
| <input type="checkbox"/> | <input type="checkbox"/> | Detention of persons in a house of prostitution or debt |
| <input type="checkbox"/> | <input type="checkbox"/> | Keeping or residing in a house of prostitution or employment in prostitution |
| <input type="checkbox"/> | <input type="checkbox"/> | Pandering |
| <input type="checkbox"/> | <input type="checkbox"/> | Transporting persons for the purpose of prostitution, polygamy and concubinage |
| <input type="checkbox"/> | <input type="checkbox"/> | Portraying adult as a minor as prescribed in section 13-3555 |
| <input type="checkbox"/> | <input type="checkbox"/> | Admitting minors to public displays of sexual conduct as prescribed in section 13-3558 |

If you have been convicted of committing, attempting to commit, soliciting, facilitating or conspiring to commit one or more of the following crimes, DPS will deny you a fingerprint clearance card, but you **WILL** be eligible to appeal the decision with the Board of Fingerprinting.

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Child neglect |
| <input type="checkbox"/> | <input type="checkbox"/> | Misdemeanor offenses involving contributing to the delinquency of a minor |
| <input type="checkbox"/> | <input type="checkbox"/> | Offenses involving domestic violence |
| <input type="checkbox"/> | <input type="checkbox"/> | Kidnapping |
| <input type="checkbox"/> | <input type="checkbox"/> | Manslaughter |
| <input type="checkbox"/> | <input type="checkbox"/> | Endangerment |
| <input type="checkbox"/> | <input type="checkbox"/> | Arson |
| <input type="checkbox"/> | <input type="checkbox"/> | Assault |
| <input type="checkbox"/> | <input type="checkbox"/> | Aggravated assault |
| <input type="checkbox"/> | <input type="checkbox"/> | Assaults on officers or fire fighters |
| <input type="checkbox"/> | <input type="checkbox"/> | Assault by vicious animals |
| <input type="checkbox"/> | <input type="checkbox"/> | Threatening or intimidating |
| <input type="checkbox"/> | <input type="checkbox"/> | Drive by shooting |
| <input type="checkbox"/> | <input type="checkbox"/> | Discharging a firearm at a structure |
| <input type="checkbox"/> | <input type="checkbox"/> | Misconduct involving weapons |
| <input type="checkbox"/> | <input type="checkbox"/> | Misconduct involving explosives |
| <input type="checkbox"/> | <input type="checkbox"/> | Depositing explosives |

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Misconduct involving simulated explosive devices
<input type="checkbox"/>	<input type="checkbox"/>	Concealed weapon violation
<input type="checkbox"/>	<input type="checkbox"/>	Aggravated criminal damage
<input type="checkbox"/>	<input type="checkbox"/>	Robbery
<input type="checkbox"/>	<input type="checkbox"/>	Theft
<input type="checkbox"/>	<input type="checkbox"/>	Theft by extortion
<input type="checkbox"/>	<input type="checkbox"/>	Shoplifting
<input type="checkbox"/>	<input type="checkbox"/>	Forgery
<input type="checkbox"/>	<input type="checkbox"/>	Criminal possession of a forgery device
<input type="checkbox"/>	<input type="checkbox"/>	Obtaining a signature by deception
<input type="checkbox"/>	<input type="checkbox"/>	Criminal impersonation
<input type="checkbox"/>	<input type="checkbox"/>	Theft of a credit card or obtaining a credit card by fraudulent means
<input type="checkbox"/>	<input type="checkbox"/>	Receipt of anything of value obtained by fraudulent use of a credit card
<input type="checkbox"/>	<input type="checkbox"/>	Forgery of a credit card
<input type="checkbox"/>	<input type="checkbox"/>	Fraudulent use of a credit card
<input type="checkbox"/>	<input type="checkbox"/>	Possession of any machinery, plate or other contrivance or incomplete credit card
<input type="checkbox"/>	<input type="checkbox"/>	False statements as to financial condition or identity to obtain a credit card
<input type="checkbox"/>	<input type="checkbox"/>	Fraud by persons authorized to provide goods or services
<input type="checkbox"/>	<input type="checkbox"/>	Credit card transaction theft
<input type="checkbox"/>	<input type="checkbox"/>	Indecent exposure
<input type="checkbox"/>	<input type="checkbox"/>	Public sexual indecency
<input type="checkbox"/>	<input type="checkbox"/>	Negligent homicide
<input type="checkbox"/>	<input type="checkbox"/>	Criminal damage
<input type="checkbox"/>	<input type="checkbox"/>	Misappropriation of charter school monies as prescribed in section 13-1818
<input type="checkbox"/>	<input type="checkbox"/>	Taking identity of another person or entity
<input type="checkbox"/>	<input type="checkbox"/>	Aggravated taking identity of another person or entity
<input type="checkbox"/>	<input type="checkbox"/>	Trafficking in the identity of another person or entity
<input type="checkbox"/>	<input type="checkbox"/>	Cruelty to animals
<input type="checkbox"/>	<input type="checkbox"/>	Prostitution
<input type="checkbox"/>	<input type="checkbox"/>	Sale or distribution of material harmful to minors through vending machines as prescribed in section 13-3513
<input type="checkbox"/>	<input type="checkbox"/>	Welfare fraud
<input type="checkbox"/>	<input type="checkbox"/>	Possession and sale of peyote
<input type="checkbox"/>	<input type="checkbox"/>	Possession and sale of a vapor-releasing substance containing a toxic substance
<input type="checkbox"/>	<input type="checkbox"/>	Sale of precursor chemicals
<input type="checkbox"/>	<input type="checkbox"/>	Possession, use or sale of marijuana, dangerous drugs or narcotic drugs
<input type="checkbox"/>	<input type="checkbox"/>	Unlawfully administrating intoxicating liquors, narcotic drugs or dangerous drugs
<input type="checkbox"/>	<input type="checkbox"/>	Adding poison or other harmful substance to food, drink or medicine
<input type="checkbox"/>	<input type="checkbox"/>	Manufacture or distribution of an imitation controlled substance
<input type="checkbox"/>	<input type="checkbox"/>	Manufacture or distribution of an imitation prescription-only drug
<input type="checkbox"/>	<input type="checkbox"/>	Manufacture or distribution of an imitation over-the-counter drug
<input type="checkbox"/>	<input type="checkbox"/>	Possession or possession with intent to use an imitation controlled substance
<input type="checkbox"/>	<input type="checkbox"/>	Possession or possession with intent to use an imitation prescription-only drug
<input type="checkbox"/>	<input type="checkbox"/>	Possession or possession with intent to use an imitation over-the-counter drug
<input type="checkbox"/>	<input type="checkbox"/>	Manufacture of certain substances and drugs by certain means
<input type="checkbox"/>	<input type="checkbox"/>	A criminal offense involving criminal trespass and burglary under Title 13, Chapter 15
<input type="checkbox"/>	<input type="checkbox"/>	A criminal offense under Title 13, Chapter 23
<input type="checkbox"/>	<input type="checkbox"/>	Felony offenses involving sale, distribution or transportation of, offer to sell, transport or distribute or conspiracy to sell, transport or distribute marijuana, dangerous drugs or narcotic drugs
<input type="checkbox"/>	<input type="checkbox"/>	Felony offenses involving contributing to the delinquency of a minor

Equal Opportunity Employer/Program ♦ Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, and disability. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact your local DES office manager; TTY/TDD Services: 711.