



## VECHS WAIVER AGREEMENT AND STATEMENT

Volunteer & Employee Criminal History System (VECHS)  
for Criminal History Record Checks  
under the National Child Protection Act of 1993, as amended,  
and Section 943.0542, Florida Statutes

Pursuant to the National Child Protection Act of 1993, as amended, and section 943.0542, Florida Statutes, this form must be completed and signed by every current or prospective employee, volunteer, and contractor/vendor, for whom criminal history records are requested by a qualified entity under these laws.

I hereby authorize (enter Name of Qualified Entity) The Christ School to submit a set of my fingerprints and this form to the Florida Department of Law Enforcement for the purpose of accessing and reviewing Florida and national criminal history records that may pertain to me. I understand that I would be able to receive any national criminal history record that may pertain to me directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34, and that I could then freely disclose any such information to whomever I chose. By signing this Waiver Agreement, it is my intent to authorize the dissemination of any national criminal history record that may pertain to me to the Qualified Entity with which I am or am seeking to be employed or to serve as a volunteer, pursuant to the National Child Protection Act of 1993, as amended, and Section 943.0542, Florida Statutes.

I understand that, until the criminal history background check is completed, you may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities. I further understand that, upon request, you will provide me a copy of the criminal history background report, if any, you receive on me and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before you make a final decision about my status as an employee, volunteer, contractor, or subcontractor.

A national criminal history background check on me has previously been requested by:

(Name and Address of Previous Qualified Entity)

(Year of Request)

I    have OR    have not been convicted of a crime.

If convicted, describe the crime(s) and the particulars of the conviction(s) in the space below:

I    do OR    do not authorize you to release my criminal history records, if any, to other qualified entities.

I am a current or prospective (check one): Employee ☒ Volunteer ☐ Contractor/Vendor ☐

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### TO BE COMPLETED BY QUALIFIED ENTITY:

Entity Name: The Christ School

Address: 106 E. Church St., Orlando, FL 32801

Telephone: (407) 849-1665 Fax: (407) 481-2325

FDLE Assigned Qualified Entity Number: F48040060

ORIGINAL - MUST BE RETAINED BY QUALIFIED ENTITY  
COPY - SEND TO FDLE WITH FINGERPRINT CARD



# Electronic Fingerprinting, Inc.

## ORLANDO OFFICE DIRECTIONS

**621 Virginia Drive**

**Orlando, FL 32803**

**407-208-0944 or 407-704-2293/Tel**

**407-704-2305/Fax**

**Appointments Scheduled online @[www.electronicfingerprinting.com](http://www.electronicfingerprinting.com)**  
**or by calling office; Walk- in welcome**

**FEES RANGE:** \$60.00 - \$97.00/per. person *\*fee range based on state agency*

**NEW HOURS: MONDAY THRU THURSDAY 9AM-5PM**

### **Directions:**

**From the North:** Take I-4 West to Princeton Exit. Turn left off ramp onto Princeton Street. Continue on Princeton Street to first traffic light N. Orange Avenue Turn Right at light. Continue to Virginia Drive. Turn left on Virginia Drive 621 will be on the left.

**From the South:** Take I-4 East to Princeton Street Exit; Turn right off ramp onto Princeton Street. Continue on Princeton Street to 1<sup>st</sup> traffic light is N. Orange Avenue turn right at light. Continue to Virginia Drive. Turn left on Virginia Drive. 621 will be on the left.

**From the East:** From E. Colonial Drive /Hwy 50 continue West on Colonial Dr. / Hwy 50 to Mills Avenue. On Mills Avenue turn right continue straight to 3<sup>rd</sup> traffic light Virginia Drive turn left on Virginia Drive 621 will be on your right.

**From the West:** From W. Colonial Drive /Hwy 50 continue East on Colonial Dr. / Hwy 50 to Mills Avenue. On Mills Avenue turn left continue straight to 3<sup>rd</sup> traffic light Virginia Drive turn left on Virginia Drive 621 will be on your right.

**\*\*Freely contact our office for specific directions, if needed\*\***

*\*This document is shredded after submission of prints\**

# Electronic Fingerprinting, Inc.

## FINGERPRINTING INFORMATION FORM

### VECH

☐ Employee # E48040060

☐ Volunteer # V48040060

# must be submitted for proper submission of Prints

☐ Self Pay

☐ Auth. to Charge Acct.

Facility /Name: THE CHRIST SCHOOL

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN \_\_\_\_\_  
(DDMMYY) (Required by DCF/APD/AHCA/VECH)

Place of Birth (State OR Country): \_\_\_\_\_

Country of citizenship: \_\_\_\_\_

Current Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Race: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Gender: \_\_\_\_\_ (Male or Female)

I \_\_\_\_\_ affirm that the above information pertain

(Please print name) to me, is my personal information, and is true and

correct to the best of my knowledge.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*Please contact DCF /APD/AHCA/VECH for specific agency processing time\*\*\*

## **PRIMARY AND SECONDARY IDENTIFICATION**

We accept **only current, valid, and unexpired picture identification documents.**

As a primary form of picture identification, a **state-issued driver's license** which meets the requirements of Public Law 109-13 may be presented by an applicant when being fingerprinted. **For those applicants without a driver's license,** a valid state identification card may be presented if the state's identification card standards are the same as the driver's license. The address on your state issued driver's license or state issued Identification will not be accepted with a Post office box address.

### **Applicants may provide one or more secondary documents including:**

- \* State Government Issued Certificate of birth (FS240)
- \* Valid U.S. Passport
- \* U.S. Activity Duty/Reservist Military Identification Card (00 10-2)
- \* Federal Government Personal Identity Verification Card (PIV)
- \* Department of Defense Common Access Card (CAC) *is a U.S. Department of Defense (DoD) smart card issued as standard identification for active-duty military personnel*
- \* U.S. Tribal or Bureau of Indian Affairs Identification (BIA)
- \* Social Security Card
- \* Court Order for Name Change/Gender Change/Adoption/Divorce
- \* Marriage Certificate (Government Certificate Issued)
- \* U.S. Government Issued Consular Report of Birth Abroad (FS240 or FS545)
- \* Foreign Passport with Appropriate Immigration Document(s)
- \* Certificate of Citizenship (N560)
- \* Certificate of Naturalization (N550)
- \* INS I-551 Resident Alien Card Issued Since 1997
- \* INS I-688 Temporary Resident Identification Card
- \* INS I-688b, I-766 Employment Authorization Card
- \* I-571 Immigration form

### **Secondary Identification Data Support Documents:**

When validating the authenticity of secondary identification documents and forms, the data and information may be supported by at least **two** of the following:

- Concealed Weapons Permit (CCW)
- Current Utility Bill (including Name/Address)
- Federal form DD-214 (military record)
- Jurisdictional Voter Registration Card
- Vehicle Registration certificate (HSMV 83399, owner's copy)
- Paycheck Stub with Name/Address
- Jurisdictional Public Assistance Card
- Spouse/Parent Affidavit
- Current Mortgage, Rental/ lease agreement document