

Pursuant to Chapter 4 of the D.C. Personnel Regulations, *Suitability*, an appointee, employee, or volunteer must complete and sign the acknowledgement and authorization contained in this form before undergoing an initial criminal background check and periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks.

NOTIFICATION

You have been appointed to or occupy, either as an employee or volunteer, a position that is subject to an initial criminal background check, periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks. If you occupy this position through a temporary detail, promotion, reassignment, or transfer, you are also subject to an initial criminal background check, periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks during the time that you temporarily occupy this position. Information obtained from a criminal background check or a traffic record check will not immediately disqualify you or create a presumption against your employment or volunteer status but will be considered in conjunction with your official duties and responsibilities, and any applicable legal requirements.

We must request certain information from you and provide you with notice of and information about the requirements for the criminal background checks and, if applicable, any traffic record checks. We use two forms to provide the required notice and information to you: (1) this **Criminal Background Check and Traffic Check Authorization Form**, which gives you individual notice and general information about the requirement for the checks and gives the District government permission to conduct an initial criminal background check, periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks; and (2) the **Disclosure Form**, which asks you to disclose specific criminal history items, if applicable.

DECLARATION

I understand and have been informed that the Government of the District of Columbia is authorized to conduct a criminal background check and any applicable traffic record check on me at the initial time of my appointment to this position (including volunteer positions) and periodically thereafter, and the District government may revoke my appointment or terminate my employment based on an assessment of those checks in relation to the duties and responsibilities of my position and any applicable legal requirements. I further understand that the District government may conduct periodic criminal background checks and any applicable periodic traffic record checks to determine my continued suitability for my position pursuant to Chapter 4 of the D.C. Personnel Regulations.

In accordance with Federal Bureau of Investigation (FBI) policies and procedures, the District of Columbia Department of Human Resources (DCHR) or another appropriate entity will conduct my criminal background checks. If applicable to my position, I understand that traffic records will be obtained from the traffic records maintained by my state or local motor vehicle administration.

I understand that I have the right to obtain a copy of the criminal background check report and to challenge the accuracy and completeness of the report. If my criminal background check report and/or traffic records reveal derogatory information, I understand that I shall be notified as to the source, nature, and potential impact of the derogatory information. I understand that I will receive a minimum of ten (10) business days and no more than twenty-one (21) calendar days to provide a response to the derogatory information through an in-person interview or written response.

ACKNOWLEDGEMENT & AUTHORIZATION

I acknowledge that I have been informed that I will occupy, or currently occupy, a position that requires an initial criminal background check, periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks. I further acknowledge the receipt of this Criminal Background Check and Traffic Check Authorization Form, and I consent and authorize DCHR, or the appropriate entity, to conduct an initial criminal background check, periodic criminal background checks and, if applicable, an initial traffic record check and periodic traffic record checks, as described in the Notification and Declaration sections of this form.

_____	_____
Full Name (Print)	Social Security Number ¹
_____	_____
Date of Birth	Agency
_____	_____
Driver's License or ID Number	Job Title
_____	_____
State Issuing License or ID	
_____	_____
Email	Phone Number
_____	_____
Signature	Date

FOR OFFICIAL USE ONLY			
Report To: _____	on _____	at _____	
Location	Date	Time (HH:MM))(AM/PM)	

¹**NOTE:** Information regarding disclosure of your social security number ("SSN") is noted at 6-B DCMR § 3104.3. Disclosure of your SSN is mandatory to obtain the services and benefits of employment with the District government. The SSN is used as an identifier throughout your District government career. The SSN also will be used by the District government in connection with lawful requests for information about you directed to your former employers, educational institutions and financial or other organizations. The information gathered through the use of the SSN will be used only as necessary in personnel administration processes carried out in accordance with established regulations and published guidance.