

**INSTRUCTIONS**  
for obtaining your  
**FBI Background Check**

For students in EDUC 103 and 104 who WILL NOT be pursuing teacher licensure you must have an FBI background check before entering a school for your field placement.

Please follow these steps to obtain your FBI Background check:

- a. First, pay \$30 for both the **FBI background check** using this link: [Web Check Fingerprinting \(jotform.com\)](https://www.jotform.com) or QR code →
- b. Once you've paid, you will automatically be directed to a page to schedule your background check.



**c. Bring with you to your appointment:**

- Your government issued driver's license, state ID, passport or military ID
  - The "Request for FBI Background Check via Electronic Fingerprinting" form, which is page 2 of this document or on the opposite side of this page if you have a printed copy.
- d. You will conduct your Background Check at the Wittenberg Police Department in the Recitation Annex. *Please arrive 5 minutes early for your appointment.*

2.



# Request for FBI Background Check via Electronic Fingerprinting

Educator Preparation

**BRING THIS COMPLETED FORM & A PICTURE ID WITH YOU TO YOUR APPOINTMENT**

**→ You also need to know your Social Security Number ←**

**You must pay for your Background Check prior to making an appointment**

**by going to this link: [Web Check Fingerprinting \(jotform.com\)](http://Web Check Fingerprinting (jotform.com))**

*Upon payment, you will be directed to a webpage to schedule your appointment*

Name: \_\_\_\_\_ Type of Photo ID: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Current address: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

**Reason for Background Check:**

BCI: 3319.39B3

FBI: 3319 291

**Direct Copy to:**

Ohio Department of Education

**Address for results to be**

**mailed to:**

Wittenberg University  
Education Department  
PO Box 720  
Springfield OH 45501

**PLEASE READ & SIGN**

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize the Ohio Bureau of Criminal Identification & Investigation to conduct a criminal records check for the information related to me. I also voluntarily and knowingly authorize BC&I to disseminate criminal arrest, conviction, and juvenile delinquency adjudication records to Wittenberg University. I voluntarily and knowingly release and discharge the Ohio Attorney General’s Office, BC&I and their employees from all claims and liability related to this authorized criminal record review and dissemination.

\_\_\_\_\_  
**Applicant’s Name** (Please print)

\_\_\_\_\_  
**Witness Name** (Please print)

\_\_\_\_\_  
**Applicant’s Signature**

\_\_\_\_\_  
**Witness Signature**

\_\_\_\_\_  
**Parent/Guardian Name** (minor applicant’s only)

\_\_\_\_\_  
**Parent/Guardian Signature** (minor applicant’s only)