

Manual Record Check Request Form



This form is for the use of persons and organizations requesting criminal history record checks of the Kansas Central Repository by mail rather than over the Internet. Complete this form and mail it, with appropriate payment, to the Kansas Central Repository, Attn: KBI Criminal History Records Section, 1620 SW Tyler, Topeka Kansas 66612-1837.

If you have Internet access and wish to conduct this record check on-line, please visit the Kansas Bureau of Investigation (KBI) website at www.accesskansas.org/kbi/criminalhistory/.

1. This request for access to criminal history record information is made by the following person, company or agency, hereinafter called **Requestor**:

Name of person/organization: _____

Mailing Address: _____

Name of Organization's Point of Contact: _____ Title: _____

Telephone: () _____ FAX: () _____ E-mail: _____

2. The Requestor will use the record checks to provide background information for: *(check all that apply)*

<input type="checkbox"/> Employment	<input type="checkbox"/> Lawsuit or court proceeding	<input type="checkbox"/> Adoption or foster care
<input type="checkbox"/> Volunteer work	<input type="checkbox"/> Other legal process	<input type="checkbox"/> Visa, emigration or immigration
<input type="checkbox"/> Private investigation	<input type="checkbox"/> Performance bond/certification	<input type="checkbox"/> Genealogical research

(Other. Please describe) _____

3. Dissemination of criminal history record information is governed by statutes, laws and regulations. The Requestor will comply with and be subject to the provisions of both State and Federal law and regulations, including, but not limited to:
- a. Title 28 (Judicial Administration) of the Code of Federal Regulations.
 - b. Crime Control Act of 1990; Pub. L. No. 101-647
 - c. The National Child Protection Act of 1993; 42 U.S.C. 5119, with subsequent amendments
 - d. Kansas Statutes Annotated 22-4701 et seq.
 - e. Kansas Administrative Regulations 10-12-1 et seq.
4. Requestor agrees to limit disclosure of the information received to personnel who have a clear and distinct "need to know," and ensure that the information is used only for the purpose for which provided. Further, Requestor shall:
- a. Implement reasonable procedures to insure the confidentiality and security of any information received.
 - b. Indemnify and hold harmless the KBI, their employees, including their heirs, executors, administrators, personal representatives, successors, and assigns, from and against any and all causes of actions, claims, demands, suits, rights and other proceedings of any nature which seek damages or other remedies arising from the providing of criminal history information.
5. The KBI has the right to demand return of all information provided to the Requestor when any rule, policy, procedure, regulation, or law described in this request is violated or appears to be violated, or for non-payment of any service.
6. The Requestor acknowledges and consents to the above-stated conditions.

(Signature of Requestor or Requestor's Representative)

(Date)

Kansas Central Repository

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This page is used to provide identifying information for one person to be checked. The **Full Name** and **Date of Birth** are mandatory fields; the record check cannot be done without at least those two fields. Please include as much additional information as possible to ensure the best search is conducted. Note that each search permits the addition of one alias or maiden name. If the subject of the search has been known by three or more names, then submit a second record check form for the third name. Searching the first two names will be done in the first record check. The third name searched constitutes a new, billable record check.

Attach additional copies of this page as needed for more searches.

This is not the proper form to use for CERTIFIED record checks. If you require CERTIFIED record checks, print the *Request for Certified Record Check* form found on the KBI Public Access web site: www.accesskansas.org/kbi/criminalhistory/

Requested by: _____ **Date of Request:** _____
(Your printed name in case this page is separated from the first page)

Identification of the individual to be searched:

A fingerprint card [is] [is not] included.

Full Name: _____
Last Name First Name Middle Name (Jr, Sr, III ...)

Alias/Maiden Name: _____
Last Name First Name Middle Name (Jr, Sr, III ...)

Date of Birth: _____ Social Security Number: _____ - _____ - _____
MM/DD/YYYY

Sex: _____ Race: _____ Place of Birth: _____
(City, State or Foreign Country)

Height: _____ Weight: _____ Occupation: _____

Residence: _____

For KBI Use

Total Payment for ALL searches requested. Make checks payable to: ***KBI Record Check Fee Fund***

_____ name searches at \$20.00 per search or _____ fingerprint searches at \$29.75 per search = \$ _____ **total fee enclosed.**