WASHINGTON STATE PATROL

Identification and Criminal History Section
PO Box 42633, Olympia WA 98504-2633

REQUEST FOR CRIMINAL HISTORY INFORMATION
CHILD/ADULT ABUSE INFORMATION ACT
RCW 43.43.830 THROUGH 43.43.845

(Instructions on Reverse Side)

A REQUESTING AGENCY/ADDRESS

Agency: Sea Mar Community Health Centers

Attn: Crystal Corpuz

Address: 8720 14th Ave S. Seattle, WA 98108

City/State/Zip

I certify this request is made pursuant to and for the purpose indicated.

Authorized Signature _____ Date _____

Title: Medical Dept Coordinator

Area Code/Phone Number: (206) 764-0522

B PURPOSE

Check appropriate box

- ☐ Educational School District (ESD)/School District Volunteer – no fee
- ☒ Non-Profit Business/Organization – no fee (Excluding Schools & ESD's)
- ☐ Profit Business/Organization - $35
- ☐ Adoptive Parent - $35

Fees: Make payable to **Washington State Patrol** by check, money order, or business account.

Notary letters certifying the results are available upon request. There is an additional $5.00 processing fee per notary seal.

_____ Notarized Letter(s)

C APPLICANT OF INQUIRY **(Please provide as much information as possible; name and date of birth are mandatory.)**

Applicant's Name: _____
Last First Middle

Alias/Maiden Name(s): _____

Date of Birth: _____ Sex: _____ Race: _____
Month/Day/Year

Social Security Number: _____ Driver's Lic. Number/State: _____ / _____

Secondary dissemination of this criminal history record information response is prohibited unless in compliance with statute.

D WASHINGTON STATE PATROL IDENTIFICATION & CRIMINAL HISTORY SECTION

As of this date, the applicant named below has no record pursuant to RCW 43.43.830 through 43.43.845.

Sea Mar Community Health Centers
Requesting Agency

Applicant's Signature

Applicant's Name

Address

City/State/Zip

WSP Use Only

Applicant Right Thumb Print (Optional)

MAIL COMPLETED FORM TO:

WASHINGTON STATE PATROL
IDENTIFICATION AND CRIMINAL HISTORY SECTION
PO BOX 42633
OLYMPIA WA 98504-2633

FOR FURTHER INFORMATION, CONTACT THE WASHINGTON STATE PATROL AT:
PHONE: (360) 705-5100
E-MAIL: crimhis@wsp.wa.gov
WSP WEB SITE: http://www.wa.gov/wsp/

Washington State conviction criminal history record information is available on the Internet using WATCH (Washington Access to Criminal History). You may use an account established by mail or conduct a search using a credit card (Discover, American Express, Visa, or MasterCard). An account application can be printed by accessing WATCH "HELP" files on the Internet. A $10 fee is charged for each name and date of birth search, regardless of the outcome.
WATCH WEB SITE: https://watch.wsp.wa.gov

CHILD/ADULT ABUSE RECORD SEARCH GUIDELINES

Refer to Revised Code of Washington (RCW) 43.43.830-43.43.845 for complete information. Child/Adult Abuse Information Act background checks may be conducted by Washington State businesses, organizations, or individuals. Other states must conduct searches under the Criminal Records Privacy Act, RCW 10.97.

1. ***Searches can be conducted only on prospective employees, volunteers, or adoptive parents.***
   Background checks can be conducted on prospective employees, volunteers, or adoptive parents who will or may have unsupervised access to children under sixteen years of age, developmentally disabled persons, or vulnerable adults. The background check is for initial employment or engagement decisions only.
   Background checks on current employees or volunteers should be done through the Criminal Records Privacy Act, RCW 10.97

2. ***Applicants must be notified an inquiry may be made.***
   A business or organization shall not make an inquiry to the Washington State Patrol unless the business or organization has notified the applicant, who may be offered a position as an employee or volunteer that an inquiry may be made.

3. ***A business or organization must prepare a disclosure statement to be signed by the applicant before a background check may be conducted.***
   A business or organization shall require each applicant to disclose whether the applicant has been:

   (a) convicted of any crime;
   (b) had findings made against him or her in any civil adjudicative proceeding;
   (c) has both a conviction and findings made against him or her.

4. ***Applicants must be notified of the response.***
   The requesting agency shall notify the applicant of the Washington State Patrol's response within ten days after receipt. The employer shall provide a copy of the response to the applicant and shall notify the applicant of such availability.

NOTE: The requested record information is furnished solely on the basis of name and/or description similarity with the subject of your inquiry. Positive identification or non-identification can only be effected upon receipt of fingerprints.