



Policy Name: EMS Personnel Background Check Policy
Policy Number: 6.1-020113

PURPOSE: To ensure all EMS certification applicants undergo a National and State background investigation to identify any such individuals who may pose a risk to the safety and security of the citizens of WV.

POLICY: Certified EMS personnel are uniquely situated to have complete access to a citizen when they are most vulnerable. A background investigation will be conducted to ensure the applicant does not have a history of crimes against property, person or public trust and other charges that could pose a public threat. It is the responsibility of the applicant to apply for the criminal background check according to the procedures and directions of this policy.

PROCEDURE/REQUIREMENTS:

- A. All applicants for initial EMS certification in West Virginia must obtain a criminal background check **except**:
 - 1. EMT – Miners.
 - 2. Individuals who have completed a criminal background check for WVOEMS certification within the previous three (3) years.
 - 3. Individuals with a verified criminal background check from a governmental licensing agency required to conduct a comparable background check within the previous three (3) years may be recognized by WOVEMS.

- B. WVOEMS will only cover fees for the background check from the designated vendor. The applicant is responsible for all other fees charged for processing or printing.

- C. Applicants should apply for a criminal background check as early as possible in the education and certification process as:
 - 1. It may take six (6) or more weeks for WVOEMS to receive criminal background check results.
 - 2. Temporary certificates will **not** be issued pending receipt of criminal background check results.

- D. Results of criminal background checks must be submitted directly to WVOEMS by the designated vendor.

- E. Criminal background check procedure:
 - 1. Applicants must follow the Manual Card Submission Procedures for the vendor chosen by the West Virginia State Police (WVSP) for processing backgrounds. **Please note: Law Enforcement Agencies may charge a fee for fingerprinting in addition to the processing fee. These fees are not covered by WVOEMS.**
 - a. Present a valid photo ID.
 - b. Complete a FD-258 FBI fingerprint card for the criminal background check (example attached).



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- b. Complete a FD-258 FBI fingerprint card for the criminal background check (example attached).
- c. Complete a WVSP 39 Fingerprint Authorization card.
- d. Mail the following items to a designated vendor:
 - i. Completed FD-258 fingerprint card
 - ii. A WV Card Scan Information Form
 - iii. The fully completed fingerprint card along with WV Card Scan Information Form and Authorization Form

- F. West Virginia Office of Emergency Medical Services will complete these additional background checks:
- 1. U.S. Health and Human Services – Office of the Inspector General's exclusion list.
 - 2. Sex offender registries.
 - 3. Child support payment status.
 - 4. National Healthcare Integrity and Protection Data Bank.

APPLICABLE CODE/RULE: WV Code §16-4C-6, §16-4C-8, and §64 CSR 48-6.

APPENDICES: Finger Print Card Submission Procedures Form for L1 Live Scan site locations.

Special Note: The designated vendor for the WVSP at the time of this policy is:

L-1 Enrollment - Morphotrust
West Virginia Cardscan
1650 Wabash Avenue, Suite D
Springfield, IL 62704

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APPENDICES: Finger Print Card Submission Procedures Form for L1 Live Scan site locations.

Manual Card Submission Procedures

Applicants who are unable to be fingerprinted in WV at a MorphoTrust Live Scan site can submit FBI hard cards to the MorphoTrust card scan office. The MorphoTrust hard card scanning program utilizes advanced scanning technology to convert a traditional fingerprint card (hard card) into an electronic fingerprint record. Converting a "hard card" into an electronic record enables an applicant to have their fingerprint record processed as quickly as if they had traveled to a LiveScan machine. The section below details the procedures for submitting fingerprints to the LiveScan Processing Unit.

West Virginia

- Applicants should obtain a set of fingerprints from a local law enforcement agency or other entity that provides fingerprinting services. These fingerprints may be either traditional ink rolled fingerprints or LiveScan fingerprints.
- Fingerprints may be submitted on FBI applicant cards or fingerprint cards from any other state or local government agency (we prefer standard FBI applicant cards). Standard card is form FD-258 available from your agency or the FBI. **Slap prints (all four fingers at once on each hand) on the bottom of the card MUST be printed vertically in the assigned boxes on the card, not slanted or horizontal.**
- Applicants need to make sure the fingerprint card is completely filled out. Required information includes: Full name, date of birth, home address, sex, height, weight, hair color, eye color, place of birth (state or country only), citizenship, reason fingerprinted and ORI.
- Applicants will need to mail a copy of the appropriate West Virginia Card Scan Information Form with the fingerprint card. All fields must be completed and match information provided on the fingerprint card. **All information should be legible.**
- Applicant must complete and sign one WVSP 39 or 39C Authorization form. Form 39C is used for NCPA/NCA requests. ***Any applicants under the age of 18 must have guardian signature on the fingerprint card and authorization form.***
- **Failure to completely fill out the information on the fingerprint card or failure to provide the appropriate Information Form will result in the card being returned to the applicant, which will delay the fingerprint submission.**
- The fully completed card, along with the WV Card Scan information Form, Authorization Form, and the appropriate fee (indicated in the application packet) should then be mailed to the following address:

MorphoTrust
West Virginia Cardscan
1650 Wabash Avenue, Suite D
Springfield, IL 62704

Please include a daytime telephone number or email address where the applicant can be reached if we have a question about the fingerprint card.

- Please include the full name of the applicant on each check or money order.
- Applicants wishing to verify that a fingerprint card has been processed may call (855) 766-7746 and speak with a customer service representative.



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EXAMPLE: Reverse Side of FE-258

FORM 5-1-2010

FEDERAL BUREAU OF INVESTIGATION UNITED STATES DEPARTMENT OF JUSTICE CJIS DIVISION/CLARKSBURG, WV 26306

APPLICANT

THIS CARD FOR USE BY:

- LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS**
- OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT LICENSING AND PERMITS AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES. LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT**
- U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW**
- OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS

Please provide the required information to aid in the successful processing of latent prints, criminal and civil fingerprint submissions in order to prevent denial of requests. **Hand Size:** Fingerprint submissions must meet specific criteria for processing by the Federal Bureau of Investigation. **Ensure all information is typed or legibly printed using black or black ink.**
 Enter data within the boundaries of the designated field or block.
 Complete all required fields. **It is required that a left blank** the fingerprint card may be submitted without further processing.
 Do not use more than two fields per fingerprint impression (i.e., impressions).
 * The required fields for latent prints: Impression, date, originating agency, date of birth, date of print, year of birth, name, sex, fingerprint impression, any appropriate state stamp. **Other state height, weight, eye color, hair color.**
 ** Criminal fingerprint cards also require an arrest charge and date of arrest.
 *** Latent fingerprint cards also require a reason fingerprint and date fingerprint.

Do not use highlighters on fingerprint cards.
 Do not enter data or labels within "Leave Blank" areas.
 Ensure the "Apply Desired" field is checked when applicable (criminal only).
 Ensure fingerprint impressions are rolled completely from heel to toe.
 Ensure fingerprint impressions are in the printed sequence.
 Ensure no lines or marks for any missing fingerprint impression (i.e., impressions).
 Do not use more than two fields per fingerprint impression block.
 Ensure no stray marks are within the fingerprint impression blocks.

Fingerprint data can be updated online via the Internet by accessing the FBI's website at: go.fbi.gov/fp.
 Fingerprint Links A Training Alert: Contact questions to the Identification and Investigative Services Section's Customer Service Group at (304) 825-5900 or by e-mail at fpmail@fbi.gov.

PRIVACY ACT STATEMENT
 Authority: The FBI's acquisition, preservation, and exchange of information requested by this form is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include numerous Federal statutes, hundreds of State statutes (pursuant to Pub.L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States, or other authority. Examples include, but are not limited to: 5 U.S.C. 552a, Pub.L. 94-202, Pub.L. 101-504, and Executive Orders 12855 and 12958. Processing the requested information is necessary, however, failure to furnish the information may affect timely completion or approval of your application.

Social Security Account Number (SSAN): Your SSAN is needed to verify records, accurate records of other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 U.S.C. 552a), the requesting agency is responsible for informing you where disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is collected, and what uses will be made of it. Executive Order 12958 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, security, licensing, and adoption, may be predicated on fingerprint-based factors. Your fingerprints and other information processed on (and along with) this form may be submitted to the requesting agency, the agency conducting the application investigation, and/or FBI for the purpose of processing the submitted information to available records in order to identify other information that may be pertinent to the application. During the processing of this application, and for as long thereafter as may be relevant to the activity for which this application is being submitted, the FBI may disclose any potentially pertinent information to the requesting agency and/or to the agency conducting the investigation. The FBI may also retain the submitted information in the FBI's permanent collection of fingerprints and related information where it will be subject to comparisons against other submissions received by the FBI. Depending on the nature of your application, the requesting agency and/or the agency conducting the application investigation may also retain the fingerprints and other submitted information for other authorized purposes of both agencies.

Routine Uses: The fingerprints and information reported on this form may be disclosed pursuant to your consent and may also be included by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 U.S.C. 552a(b)) and all applicable routine uses as may be published at any time in the Federal Register, including the routine uses for the FBI Fingerprint Identification Records System (Justice/FBI-007) and the FBI's Biometric Routine Uses (Justice/FBI-001). Routine uses include, but are not limited to, disclosures to appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant, to State and local governmental agencies and nongovernmental entities for application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, job adoption checks, and as otherwise authorized by law, treaty, executive order, regulation or other lawful authority. If other agencies are involved in processing this application, they may have additional routine uses.

Additional Information: The requesting agency and/or the agency conducting the application investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authority, purposes, and routine uses for the system(s).

INSTRUCTIONS:

- PRINTS MUST GENERALLY BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU AND ONLY THOSE FINGERPRINTS FOR WHICH NO INDIVIDUAL FINGERPRINT CARD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
- IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER" AND ADDRESS. THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
- FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.

** MACILLANE (US NO. - RECORDS - OTHER ARMED FORCES NO. PASSPORT NO. (TP) ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS), VETERANS' ADMINISTRATION CLAIM NO. (VA)

FD-258 (REV. 3-1-10)
 GPO: U.S. GOVERNMENT PRINTING OFFICE: 06/06/2012 14 41 53



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EXAMPLE: WV Card Scan Information Form

West Virginia Card Scan Services – Information Form

Instructions for applicant: Please complete and return

1. Card scan Information Form (this form)
2. Payment made payable to MorphoTrust
3. Two (2) completed fingerprint cards
4. One (1) WVSP 39 Authorization form or one (1) WVSP 39P Authorization form for NCPA requests

Send above packet to:

MorphoTrust
 West Virginia Cardscan Dept
 1650 Wabash Ave Suite D
 Springfield IL 62704

Checks should be made payable to MorphoTrust

Please Print Clearly

ORI: _____ Contributor Agency: _____

Check one: New Submission Resubmission If resubmission, list TCN Number here: _____

Name of Applicant: Last _____ First _____ M.I. _____

Alias / Maiden Name: _____

Street Address: _____

City, State, & Zip: _____

Date of Birth: _____ Age: _____ Sex: Male Female

Race: _____ Ethnicity: Hispanic Non- Hispanic Unknown

Height: _____ ft. _____ in. Weight: _____ lbs.

Skin Tone: _____ Eye Color: _____ Hair Color: _____

State/Country of Birth: _____ Country of Citizenship: _____

Social Security number: _____ Contact Phone Number: _____

Payment Section:

- Regular Background Check (WV state check only) \$28.85
- Central Abuse Background Check (WV state check only, DHHR facility number needed) \$18.85
- NCPA / VCA Background Check (WV state and FBI check) \$33.85
- State and Federal Background (if authorized by WVSP and FBI) \$45.35
- Payment for the Card Scan submission must be included with your fingerprint cars made payable directly To MorphoTrust - in the form of a personal, business, and certified or bank check or a money order.



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EXAMPLE: WVSP 39

WVSP 39 1/03	FINGERPRINT AUTHORIZATION	_____
	Type or Print ALL Information	(Facility Number)
Address of Applicant _____		
Certification: I hereby request a record check be made to find any police record on the herein named individual and by submitting this request, I understand that the submitted information will be retained by the West Virginia State Police in the Automated Fingerprint Identification System.		
I certify that this is for official business and I am authoring _____ To obtain any record found.		

_____ (Signature)		_____ (Address)



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EXAMPLE: WVSP 39C

WVSP 39C 1/08	NCPA/VCA FINGERPRINT AUTHORIZATION TYPE OR PRINT ALL INFORMATION	_____ Entity Number
Address of Applicant _____		
Certification: I hereby request a fingerprint based criminal history record check be made to find any West Virginia or federally maintained arrest record on the herein named individual and by submitting this request, I understand that the submitted information will be retained by the West Virginia State Police and /or the FBI in the Automated Fingerprint Identification System.		
I certify that this is requested for official business and am authorizing <input type="checkbox"/> only the listed qualified entity or <input type="checkbox"/> any qualified entity to obtain a copy of any record found.		
_____ (Signature)	_____ _____ (Qualified Entity and Address)	