

Background Check Waiver

Please Print

Last Name, First Name, Middle Name		Date of Birth
Address		
City	State	Zip Code

I hereby authorize the Nebraska Department of Revenue (Department) to submit a set of my fingerprints and this form to the Nebraska State Patrol for the purpose of accessing and reviewing the Nebraska and FBI national criminal history records that may pertain to me. I understand that I would be able to receive any national criminal history record that may pertain to me directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34, and that I could then freely disclose any such information to whomever I chose. By signing this waiver, it is my intent to authorize the dissemination of any national criminal history record that may pertain to me to the above agency.

I understand that, upon request, the Department will provide me a copy of the criminal history background report, if any, they receive on me and that I am entitled to challenge the accuracy and completeness of any information contained in the report.

Information on how to challenge your federal report can be found at FBI.gov. To challenge your Nebraska state record, contact the Nebraska State Patrol-Criminal Identification Division. I may obtain a prompt determination as to the validity of my challenge before the Department makes a final decision about my status.

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 authorized authorities. Examples include, but are not limited to 5 U.S.C. 910; Pub.L. 101-604; and Executive Orders 10450 and 12968. Providing the requested information is voluntary, however, failure to furnish the information may affect timely completion or approval of your application.

sign
here

Signature of Applicant

Date