

Instructions for Application for Criminal History Record

Enclosed is an application for Criminal History Record from the State of Utah, Department of Public Safety, Bureau of Criminal Identification. Please complete all of the steps described below. Failure to properly complete one of the steps may cause a delay in processing your application.

- 1. Fill out the top portion of the application. List all of your previous names including married and maiden names. Be sure to read and sign the application.
- 2. Take the application to a law enforcement agency such as your city police department or county sheriff's office. Request that they print the four fingers of your right hand on the space provided. Make sure the law enforcement official who takes your fingerprints fills out the portion of the application labeled "OFFICIAL TAKING PRINTS." Valid government-issued photo ID must be provided to the official taking your prints (for example, passport, state ID card, consulate ID card, and driver license.) "Utah Driving Privilege Cards" WILL NOT be accepted by BCI as valid ID. Driving Privilege Cards state on them that they are not to be used as ID. NOTE: The fingerprints may be taken at our office, (fingerprint appointment not necessary for criminal history report) Bureau of Criminal Identification, 3888 West 5400 South, Taylorsville, Utah. You must include a photo copy of your ID with your application.
- 3. The application fee is \$15.00. Select a method of payment by making a check mark in the appropriate box. Checks and money orders must be US Currency and be made payable to "Utah Bureau of Criminal Identification." To pay by credit card (Visa, MasterCard, Discover Card or AMEX), please fill out the requested information on the application. Credit card numbers must include: the signature of the cardholder, the three-digit control number located on the back of the card, and the expiration date. Cash is accepted only when applying in person. **DO NOT SEND CASH IN THE MAIL.**
- 4. Your report will be mailed to the mailing address indicated on the application form. If the information needs to be sent to a third party, the third party release form must be filled out and submitted along with your application.
- 5. Mail the application, fee and release form (if applicable) to:

UTAH BUREAU OF CRIMINAL IDENTIFICATION 3888 West 5400 South Taylorsville, Utah 84129

The report cannot be faxed or sent by e-mail.

If you have questions you may call (801) 965-4445 from 8:00 AM - 5:00 PM Monday-Friday. Our office is closed weekends and holidays.

You may also visit our website at http://publicsafety.utah.gov/bci/

The Bureau of Criminal Identification does not maintain juvenile offender records. Requests for such records must be made directly to the Juvenile Court.

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APPLICATION FOR CRIMINAL HISTORY RECORD

Utah Department of Public Safety • Bureau of Criminal Identification 3888 West 5400 South, Taylorsville, Utah 84129 - Telephone: (801)965-4445

form 98-1-03, Rev 04/2022

WHEN FILLING OUT THIS APPLICATION TYPE OR PRINT IN BLACK INK. Your application will not be processed unless all sections of this form are filled out completely. You will need a valid form of government issued picture ID and \$15.00 fee.

form are filled out completely. You	will need a valid form of gove	rnment i	ssued picture ID a	and \$15.00 fee.		
NAME:	(First Name)				DATE OF BIRTH	
(Last Name) PREVIOUSLY USED NAME				iddle Name)		
MAILING ADDRESS:	(Street/Box number)		(6	ity)	(Chata)	(7:)
PHYSICAL ADDRESS:			·		(State)	(Zip)
HOME PHONE NUMBER: _	DAY	OAYTIME PHONE NUMBER:				
SOCIAL SECURITY: DRIVER LICENSE # AND STATE:						
PHYSICAL DESCRIPTION:	HGT/WGT/	E	YE COLOR/	SEX/	RACE/	
I hereby declare that I am the pe The information contained in thi I make that I do not believe to be	s written statement is true a true may subject me to crim	ind corr inal pun	ect to the best of ishment as a clas	Emy knowledge is B misdemeanor	and I understand that r pursuant to Utah Co	any false statements de Ann. §76-8-504.
Signature of applicant:						
FINGERPRINT INSTRUCTION signature and date of birth. Confirm provided below. Fingerprint the form	n ID with the information above	e, then l	ist the type of gov	ernment issued ID	used and the ID numb	er in the space
This Area must be completed b	y OFFICIAL TAKING PRI	NTS		FIN	GERPRINTS	
Type of identification used: (Utah Driving Privilege Cards are not valid ID and will not be accepted)						
Identification number:						
Name on ID:						
Fingerprints taken by:(PRINT	T NAME)					
Agency Name:						
Badge #(If applicable)	Date Printed:					
BUREAU USE ONLY AFIS Co	nfirmation					
SID#_	R&F					
						1
METHOD OF PAYMENT (Only to be filled out if application is mailed in. Check appropriate box for payment)						
Check, Money Order or Cashier's Check (Payable to "BCI") There will be a \$20.00 service charge for any returned check.						
☐ Credit Card (cannot use foreign credit cards) must be ☐ Visa ☐ Master Card ☐ Discover ☐ AMEX Fill out the information below to pay by credit card. *3 or 4 digit control # Exp Date MM/YY						
Cardholder signature:			Name o	on Credit Card: _		



THIRD PARTY RELEASE FORM

Utah Department of Public Safety • Bureau of Criminal Identification 3888 West 5400 South, Taylorsville, Utah 84129

WHEN FILLING OUT THIS FORM, TYPE OR PRINT IN BLACK INK. If you wish to have your criminal history record or certificate of eligibility sent to an individual other than yourself, you must indicate the name of the person or agency to whom you would like the document sent and the mailing address.

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NAME: Hollie Quintanilla (Name of Person to Receive Report)							
(Name of Ferson to Receive Report)							
AGENCY: Professional Education at the University	(if applicable)						
MAILING ADDRESS: 540 Arapeen Drive #210	Salt Lake City	UT	84108				
(Street/Box number)	(City)	(State)	(Zip)				
PHONE NUMBER: 801-585-1780	EMAIL ADDRESS:	proed@utah.edu					
		EMAIL IS FOR EXPUNGMENT APPLIC	ATIONS ONLY				
I request that the criminal history record or certificate of eligibility for which I applied be released to the individual or agency indicated above at the listed address. I hereby release the Bureau of Criminal Identification from any liability resulting from such release.							
Name of applicant (Print):							
Signature of applicant:	Date:						