

42110 Russia Road Elyria, OH 44035-6813

440-326-5851 Phone 440-326-5878 Fax

www.lorain.osu.edu

4-H Volunteer Criminal History Fingerprint Background Check Procedure & Reimbursement Form

Please take this page with you when you go to have your background check.

In Lorain County, 4-H volunteers may have their BCI background check done at one of the following locations or go to: www.ohioattorneygeneral.gov for additional Web Check locations.

Company Information	Hours
Oberlin Police Department (BCI & FBI)	24/7 Sunday – Saturday
85 South Main Street	Call first to ensure the booking area is available.
Oberlin, OH 44074	BCI \$27, FBI \$30, Both \$57
440-774-1061	
Lorain Amherst License Bureau (BCI & FBI)	Monday – Friday
4340 Leavitt Road, Unit K	By appointment only
Lorain, OH 44053	By appointment only
440-244-5445	
Educational Serv Ctr of Lorain County (BCI & FBI)	By appointment only
1885 Lake Avenue	ADA Accessible; Mobile Unit Available
Elyria, OH 44035	BCI \$34, FBI \$37, Both \$65
440-324-5777	
Lorain County Sheriff's Office (BCI & FBI)	Monday – Sunday 11:00am to 6:00pm
9896 Murray Ridge Road	ADA Accessible
Elyria, OH 44035	
440-329-3703	
Wellington Police Dept (BCI & FBI)	24 – 7
117 Willard Memorial Square	By appointment only
Wellington, OH 44090	
440-647-2244	
Child Care Resource Center (BCI & FBI)	Monday – Friday 9:00am to 4:00pm
5350 Oberlin Avenue	By appointment only
Lorain, OH 44053	ADA Accessible
440-960-7187	BCI \$35, FBI \$35, Both \$70

What You Need to Get Your Ohio 4-H Background Check

- 1. A government issued photo ID such as your driver's license showing current address and your date of birth.
- 2. Your Social Security Number If you know your number, there is no need to bring your SS card.
- 3. If you have not lived in Ohio for the last five consecutive years, you are required to complete both a BCI (Ohio) and FBI (National) background check. Use the following reason codes:

BCI Revised Code: 2151.86

FBI Revised Code: 2151.86, Out of Home Child Care

4. Background check results must be mailed DIRECTLY to:

Attention: Background Checks – 4-H LORAIN COUNTY
OSU Office of Human Resources
1590 N. High St., Ste. 300
Columbus. Ohio 43201

If the agency is not able to get a good scan of your fingerprints, you will need to complete the ink fingerprint process. If you have not lived in Ohio for the last five consecutive years, you are required to complete both a BCI (Ohio) and FBI (National) ink card.

• Card #1: Ohio Bureau of Criminal Investigation (BCI) (see pages 2-3)

OSU Extension 4-H Volunteer Request for Reimbursement

• Card #2: Federal Bureau of Identification (FBI) (see pages 4-5)

The ink card(s) with payment and the <u>exemption form</u> (page 6-7) must be submitted to BCI for processing. Cash, third party or starter checks will not be accepted. A money order, certified check, business check or personal check must be made **payable to**:

Treasurer, State of Ohio

Enclose all background check contents and mail to:
Civilian Unit Identification Dept.

Bureau of Criminal Identification & Investigation (BCII)

P.O. Box 365

London, Ohio 43140

Note: The fingerprint background check process reveals past criminal convictions. The Ohio Revised Code specifies certain criminal convictions as disqualifying events that forbid current and future volunteer involvement with Ohio 4-H and OSU Extension. You can view this list at: http://go.osu.edu/DQoffenses.

If you would like to be reimbursed for the cost of your background check, keep your original receipt, and bring it along with this form, to your county OSU Extension office. Complete the form below and be sure your name appears on your receipt. We will then submit a reimbursement request for you. The reimbursement check will be mailed from OSU in Columbus; it may take eight to ten weeks to process.

Volunteer Name (Print first, middle, last): _______ Volunteer Signature: ______ Date: ______

Volunteer Signature:	Date:
For office use only. Tape receipt to top of this form before scanning.	
Date volunteer reimbursement request received at Extension Office:	(month/day/ year)
Name & initials of OSU Extension Professional receiving request:	Initials: