



OFFICE OF THE STATE BANK COMMISSIONER
WAIVER AGREEMENT AND STATEMENT
Fingerprint-Based Record Checks for Noncriminal Justice Purposes

I hereby authorize the Office of the State Bank Commissioner to submit a set of my fingerprints to the Kansas Bureau of Investigation (KBI) for the purpose of identifying me and accessing and reviewing Kansas and/or national criminal history records that may pertain to me. Pursuant to K.S.A. 22-4701 et seq. and K.S.A. 22-5001, the Office of the State Bank Commissioner may obtain my criminal history record information for noncriminal justice purposes. By signing this waiver, it is my intent to authorize release to the Office of the State Bank Commissioner of any Kansas and/or national criminal history record that may pertain to me. I further understand that, if applicable, the Office of the State Bank Commissioner may choose to deny the related application based on the information in my criminal history background.

I understand that, upon my request, the Office of the State Bank Commissioner will provide me a copy of the criminal history background report, if any, received on me, and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before the Office of the State Bank Commissioner makes a final decision about my status as an employee, volunteer or contractor, or my eligibility for any pertinent license, certification or registration, or adoption.

Under penalty of perjury, I hereby declare that I am the person described below, and understand that any falsification of this statement constitutes a severity level 9, nonperson felony under the provisions of Title 21 Kansas Statutes Annotated, Section 3805.

Signature

Date

Printed Name

Date of Birth

Residential Address

City

State

Zip

Name of Organization (Applicant)

Title/Position

Each officer, director, and shareholder (who owns more than 10% of outstanding stock) must include a fingerprint card and fingerprint processing fee with completed Form. Only one fingerprint card is required per individual. Fingerprint cards should only be requested by the contact person located at the mailing address of the applicant.

Make checks payable to: Office of the State Bank Commissioner, 700 SW Jackson St., Suite 300, Topeka, KS 66603

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WAIVER AGREEMENT AND STATEMENT (Cont.)
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**RIGHT TO OBTAIN AND CHALLENGE ACCURACY
OF CRIMINAL HISTORY RECORDS**

To obtain a copy of your Kansas criminal history record information (CHRI) to review for accuracy and completeness, you must send a set of your fingerprints, a letter requesting your record and payment of the appropriate fee to the KBI. For further details, including the current fee, visit the following Internet website: <http://www.kansas.gov/kbi/criminalhistory>. Or, to provide official court documents to make a correction you may write to:

Kansas Bureau of Investigation
Attn: Criminal History Records
1620 SW Tyler
Topeka, Kansas 66612-1837

To obtain a copy of your federal CHRI for review and challenge, contact the FBI at the following Internet website: <http://www.fbi.gov/hq/cjisd/fprequest.htm>. Or, you may write to:

Criminal Justice Information Services Division
Attn: SCU, Module D-2
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

TO BE COMPLETED BY THE FINGERPRINTING AGENCY:

Method of Verifying Identity: Driver's License State Issued ID Card
 Military ID Card

State/Branch: _____ ID Number: _____

Agency Name: _____

Address: _____

Telephone: _____ Fax: _____

Name of Individual Verifying Identity: _____

ORIGINAL – MUST BE RETAINED BY OFFICE OF THE STATE BANK COMMISSIONER
COPY – PROVIDED TO SUBJECT OF CRIMINAL HISTORY RECORD CHECK