



Department for Children and Families
Child Development Division
NOB 1 North, 280 State Drive
Waterbury, VT 05671-1040
<http://dcf.vermont.gov/cdd>

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Agency of Human Services

VERMONT CRIME INFORMATION CENTER
FINGERPRINT AUTHORIZATION CERTIFICATE
45 State Drive, Waterbury, VT 05671-1300

APPLICANT: You must bring this certificate with you to your fingerprinting appointment. Identification Center staff **WILL NOT** submit your fingerprints to VCIC for processing without this form. **NSOR Check Authorized**

*Agency Code: 02047

REASON FINGERPRINTED:

Adoption Education ☒ NCPA Employment NCPA Volunteer Secretary of State

NAME: _____
Last First Middle

MAIDEN/OTHER NAMES: _____

DOB: _____ SSN: _____ GENDER: ☐ FEMALE ☐ MALE

PLACE OF BIRTH: _____
Town State Country

TELEPHONE NUMBER: () _____

In addition to Vermont, I have resided or been employed in the following states: (If applicable, circle appropriate states)

AL CO DE GA HI ID IL IN IA KY LA MD MA MN MS MO MT NB(NE) NV NH NM OH OR PA RI
SC TN UT WV WY

Applicant Signature: _____

☐ I certify that the above applicant has appeared before me and paid his or her criminal record check fee. I understand that the Department of Public Safety will bill my agency for this record check.

☒ Our agency is responsible for paying the record check fee. I understand that the Department of Public Safety will bill my agency for this record check.

Agency Staff Signature: _____

Date: 8/24/2022

IDENTIFICATION CENTER USE ONLY:

TVT: _____ Date Printed: _____

ATTN: ID Center's the following fields are required * before prints can be taken

