

CHILD PROTECTION ACT BACKGROUND CHECK

[Your Organization/Congregation Name]

[Address]

[City, State, Zip Code]

[Telephone number]

Because the position for which you are applying will require you to provide care, treatment, education, training, instruction, or recreation to children, [Your Organization] will request the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you under Minnesota Statutes Chapter 299C.62.

Have you ever been convicted of any of the following crimes? (If yes, please attach a description of the crime and the particulars of the conviction.)

_____ Yes _____ No

BACKGROUND CHECK CRIMES
Under Minnesota Statutes Chapter 299C

- Murder
- Criminal Sexual Conduct
- Any Assault Crime Against a Minor
- Any of the following Child Abuse Crimes committed against Minor victim, constituting a violation of Minnesota Statutes Sections:
- Felony Level Assault
- Manslaughter
- Prostitution-Related Crime
- Kidnapping
- Arson

- 609.185,(5) Murder in the 1st Degree
- 609.221 Assault in the 1st Degree
- 609.222 Assault in the 2nd Degree
- 609.223 Assault in the 3rd Degree
- 609.224 Assault in the 5th Degree
- 609.2242 Domestic Assault
- 609.322 Solicitation, Inducement and Promotion of Prostitution
- 609.324 Other prohibited acts of Prostitution
- 609.342 Criminal Sexual Conduct in the 1st Degree
- 609.343 Criminal Sexual Conduct in the 2nd Degree
- 609.344 Criminal Sexual Conduct in the 3rd Degree
- 609.345 Criminal Sexual Conduct in the 4th Degree
- 609.352 Solicitation of Children to Engage in Sexual Conduct
- 609.377 Malicious Punishment of a Child
- 609.378 Neglect or Endangerment of a Child
- 152.021, subd.1,(4) Controlled Substance Crime in 1st Degree
- 152.022, subd.1,(5) or (6) Controlled Substance Crime in 2nd Degree
- 152.023, subd.1,(3) or (4) Controlled Substance Crime in 3rd Degree
- 152.023, subd.2,(4) or (6) Controlled Substance Crime in 3rd Degree
- 152.024, subd.1,(2), (3) or (4) Controlled Substance Crime in 4th Degree

As the subject of a Child Protection background check, your rights include:

- to be informed that [Your Organization] will request this check for becoming or continuing as an employee or volunteer, and to determine whether you have been convicted of any of the above specified crimes, and
- to be informed of the BCA's response and obtain a copy of the report from [Your Organization],
- to obtain from the BCA any record that forms the basis for the report, and
- to challenge the accuracy and completeness of any information contained in the report, and
- to be informed whether [Your Organization] has denied your application because of the BCA's response and not to be required directly or indirectly to pay the cost of the background check.

Minnesota statutes and the BCA require you to complete the following information in order to complete the background check:

Last Name of Applicant (please print): _____

First Name (please print): _____

Middle (full)(please print): _____

Maiden, Alias or Former(please print): _____

Date of Birth: _____ **Sex** (M or F): _____

Month/Day/Year

Social Security Number (Optional): _____

Signature _____ Date _____

This release is valid for one year from the date of my signature.