#### **Disgualifying Five – Year Offenses**

Having a record of any of these convictions prevents you from passing the background check for five (5) years from the date of conviction.

- Any Felony Not Listed in the Permanent **Disgualifying Crimes List**
- Domestic Violence, Misdemeanor
- Failure to Report Abuse, Abandonment or Neglect of a Child
- Forgery of and Fraudulent Use of a Financial Transaction Card, Misdemeanor
- Forgery and Counterfeiting, Misdemeanor
- Identity Theft, Misdemeanor
- Insurance Fraud, Misdemeanor
- Public Assistance Fraud, Misdemeanor
- Sexual Exploitation by a Medical Care Provider
- Sexual Exploitation of a Child by Electronic Means, Felony or Misdemeanor
- Stalking in the Second Degree
- Vehicular Manslaughter, Misdemeanor • Operating a Certified Family Home Without
- Certification • Attempt, Conspiracy, Accessory After the Fact, or Aiding and Abetting to Commit Any of the Disgualifying Five (5) Year Crimes

# DISCLAIMER

The information contained in this brochure is not intended to replace or substitute current statutes and/or regulatory guidance. It is the responsibility of the agency to understand and follow statutes and administrative rules that apply to them.

#### Rev 07/2021. Previous editions are obsolete



# Criminal History & Background Check

# **Criminal History Unit Website** https://chu.dhw.idaho.gov

E-mail crimhist@dhw.idaho.gov

1720 Westgate Drive Ste. B Boise. ID 83704

Toll Free: (800) 340-1246 Phone: (208) 332-7990 FAX: (208) 332-7991

Agency ID #: \_\_\_\_\_

# How do I start the background check?

A desktop/laptop computer with internet access is the best way to complete this process.

# NOTE

Our system is compatible with some mobile devices and their operating systems. We cannot guarantee a successful application submission using a mobile device.

### Items to have on hand when applying

- Your Driver's License
- Agency ID number and contact name (see cover page of this brochure)

# Applying on the Website

- 1. Visit https://chu.dhw.idaho.gov
- 2. Sign into your account, if you have one or create an account if you are new. Please do not share your login information with any person. It is your responsibility to protect your own information in this system.
- 3. Click on either the Complete Application or Start a New Background Check button to begin.
- 4. On the Welcome Page, select the "Required DHW Criminal Background Check Agreement" box and then click Start Background Check.
- 5. Fill in the required information in each step. Click on the Save & Continue button at the bottom of each screen to advance.
- 6. Click the **Submit Application** button at the end of the application when done.
- 7. Fingerprint Scheduling: If fingerprinting at a Health & Welfare location is selected, the website will take you to our calendar tool to view our fingerprint options and locations.
- 8. If an appointment was made, print the applicant homepage. It contains the details of your fingerprint appointment and fee.
- 9. Print the application from the Homepage under the Printable Documents section.
- 10. Sign your application in the presence of a notary. Bring it with you when you come in to be fingerprinted.
- 11. If employed, you must allow your agency to review and retain a copy of your signed and notarized application.

## NOTE

Your agency may not allow you to continue the background check process if they determine that you would not pass the background check based on your disclosures.

#### How much does it cost?

Background check fees start at \$65.00. Fees may increase by clearance type. The exact amount is displayed on the Applicant Homepage.

Your payment is due at the time of fingerprinting or when we have received your fingerprints for processing.

Payment methods accepted are:

- Cash (exact amount only)\*
- Personal/Cashier's Check, Payable to IDHW
- Money Order, Payable to IDHW
- Credit/Debit Cards (a 3% convenience charge is assessed by our credit card processor)\*
- Agency's Signed Payment Authorization Letter
- \* This option is not available for applications submitted by mail.

### What do I bring to the fingerprint appointment?

- Your picture ID
- The fee or Payment Authorization Letter
- Your signed & notarized Background Check Application Form

If you are under 18 years of age, your parent or guardian must sign the application in front of a notary, giving us permission to complete the background check.

During the background check process, you may be interviewed by Health and Welfare staff and questioned about information you have disclosed.

Contact: \_\_\_\_\_

#### <u>I live in a rural area or, am out of state. I can't get</u> to an IDHW fingerprint location

You still need to complete your application on the website. Instead of scheduling a fingerprint appointment, you will click the "Mailing Fingerprints" button when you submit the application.

For more information about sending your criminal history and background check items, see our home page and the "How to Mail In Background Check Materials" for further details.

#### When can I work with clients?

That is up to your agency/employer and the rules that govern them. They may choose to have you work once they have your signed, notarized application. They may want to wait until you have been fingerprinted. Or they may want to wait until your background check is cleared.

Persons seeking a Department license or certification must wait until their background check is entirely complete. This includes those seeking to be foster parents, those looking to adopt, and those setting up Certified Family Homes. If you are unsure about your availability, ask the specific department program issuing your licensure or certification.

# What does the Application for Criminal History Background check ask?

The application will ask you to answer questions about yourself, your employer or agency, or the program you are applying for.

You must disclose all criminal history items you have. This includes juvenile and adult charges, convictions, dismissals and withheld judgments.

If you answer yes to any of the questions you will be asked by the website to fill out a supplemental form with the details. You are required to indicate if you have ever been involved in a child or adult protection action or have any pending crimes or warrants.

Your notarized signature on the Application gives Health & Welfare the authorization to conduct the background check and the right to share certain information with your employer or licensing/ certification agency. Your notarized signature also affirms that the information you provided is correct.

Failure to disclose your criminal record may result in the denial of your application for a period of five (5) years, or criminal prosecution for perjury.

### What is looked at in the background check?

The Criminal History Unit conducts a nationwide fingerprint-based background check that searches for any criminal arrests and/or convictions in any US Jurisdictions, as well registries that are pertinent to the care of the vulnerable. This includes:

- Federal Bureau of Investigation
- Idaho State Police Bureau of Criminal Identification
- Any state or federal Child Protection Registry
- Any state or federal Adult Protection Registry
- Idaho Department of Transportation Driving Record
- Any state or federal Sex Offender Registry
- Medicare and Medicaid Exclusion List
- Idaho Certified Nurse Assistant Registry

# How do I and my agency know when the background check is completed?

The criminal history system sends out an e-mail to you and your agency each time your status changes. If any action is taken, other than clearance, you and your employer will be notified by mail.

# What will prevent me from passing the background check?

#### NOTE

For some persons that provide behavioral health services, a limited purpose background check waiver may be requested through the Division of Behavioral Health. Contact your agency for more information.

#### Obtaining a Behavioral Health Waiver does not nullify or stay any denial issued by the Criminal History Unit

If you have a conviction or withheld judgment as an adult or juvenile for any of the disqualifying offenses listed below, or you are listed in some of the registries that we check, regardless how long ago these events occurred, you need to tell your employer or agency upon application, because you will be excluded either permanently or for five years depending on the item of concern. You will not pass the background check.

#### **Disqualifying Offenses/Records - Permanent**

Having any of these items on your record prevents you from passing the background check permanently.

- Abuse, Neglect, or Exploitation of a Vulnerable Adult
- Abandoning a Vulnerable Adult
- Sexual Abuse and Exploitation of a Vulnerable Adult
- Aggravated, First-Degree and Second-Degree Arson
- Assault with Intent to Commit a Serious
   Felony
- Battery with Intent to Commit a Serious
   Felony
- Crimes Against Nature
- Forcible Sexual Penetration by Use of a Foreign Object
- Hiring, Employing or Using a Minor to Engage in Certain Acts

#### Human Trafficking

- Incest
- Injury to a Child, Felony or Misdemeanor
- Kidnapping
- Lewd Conduct with a Minor
- Mayhem
- Voluntary Manslaughter, Involuntary Manslaughter, Felony Vehicular Manslaughter
- Murder in Any Degree
- Assault with Intent to Commit Murder
- Poisoning
- Rape, In Any Degree
- Robbery
- Felony Stalking
- Sale or Barter of a Child
- Ritualized Abuse of a Child
- Female Genital Mutilation
- Sexual Abuse of a Child
- Sexual Exploitation of a Child, Felony
- Sexual Battery of a Minor Child Under Sixteen (16) or Seventeen (17) Years of Age
- Video Voyeurism
- Enticing of Children
- Inducing Individuals Under Eighteen (18) Years of Age into Prostitution or Patronizing a Prostitute
- Any Felony Punishable by Death or Life
  Imprisonment
- Attempted Strangulation
- Domestic Violence, Felony
- Attempt, Conspiracy, or Accessory After the Fact, Or Aiding and Abetting to Commit Any of the Disqualifying Offenses
- Child Abuse Registry Listing Level 1 or 2
- Child Abuse Registry Listing Level 3 \*\*
- Negative Finding in the Idaho State Nurse Aide Registry
- Listed on State and/or Federal Sex
   Offender Registry
- Inclusion on the Medicare/Medicaid Exclusion List
- \*\* Only disqualifying for persons seeking an Enhanced Clearance