# City of Lincoln/Lancaster County Criminal History Check

9/1/2016

I understand that criminal history checks will be conducted on the top applicant as a condition of employment. By signing and submitting this form you acknowledge that the information is true and complete to the best of your knowledge and that any false or incomplete information may be grounds for your not being employed by the City/County, or for your dismissal after beginning work.

**Legal Last Name** _____ **Legal First Name** _____ **Middle Name** _____

**Any other legal name(s) by which you have been known (i.e. maiden name.)** _____

☐ Male ☐ Female

**Date of birth (For verification purposes only.) – Format: mm/dd/yyyy** _____ **Social Security Number – Format example: 999-99-9999** _____

**Please read the following policy:**

I understand that **ALL** convictions for **ANY** violation (bad checks, failure to appear in court, failure to pay child support, reckless driving, DUI, refusing a sobriety test, driving on a suspended license, leaving the scene of an accident, failure to render aid, driving without insurance, fictitious plates, shoplifting, urinating in public, **or any offense for which you have paid a fine, including convictions that have been "set aside", "probationed", or "pardoned") must be listed on this form or attached sheet.** Reporting of minor traffic violations is not required (i.e., parking ticket, speeding ticket.) Consideration is given to the offense(s) and the relationship to the position for which you are applying. Failure to list convictions will be considered falsification of your application and may result in automatic rejection under Lancaster County Personnel Rule 5.4(c) and Lincoln Municipal Code 2.76.230(d). Juvenile (17 years of age or less) misdemeanor convictions do not need to be listed.

I further understand that completion of the Criminal History Check form is considered part of the application process and that this document is an official City/County record maintained by the City of Lincoln/Lancaster County Human Resources Department.

Your electronic signature and submission of this form acknowledges that you have read and understand the policy and authorizes the obtaining of reports by the City of Lincoln/Lancaster County. A copy of this form is available upon request.

Signature (Electronic) _____ Date _____

| Conviction | Date & Location | Disposition |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |

**(Add additional page if needed.)**

➢ **To be completed by the Interviewing Official and emailed to applicant. See instructions on next page.**

**Please check:** ☐ **New Submission** ☐ **Resubmission**
☐ **Job Applicant** ☐ **Unclassified Worker** ☐ **Volunteer**

**Class Title for which you are hiring:** _____ **Requisition Number:** _____

**Department Name** _____ **Division** _____ **Phone#** _____ **FAX#** _____

**E-mail** _____ **Interviewing Official: Signature** _____

## For Human Resources' Use Only

LPD Criminal History Checks Verified: _____ (Initials) Date: _____

County Attorney Criminal History Checks Verified: _____ (Initials) Date: _____

Nebraska State Patrol Sex Offender Registry Verified: _____ (Initials) Date: _____

One Source Background Check Verified: _____ (Initials) Date: _____

_____ Eligible for hire _____ Eligible for hire, but not recommended _____ Not eligible for hire _____ Omitted convictions

Comment: