

CRIMINAL HISTORY INFORMATION REQUEST

OSBI Receipt Number _____

Oklahoma State Bureau of Investigation
Criminal History Reporting
6600 North Harvey, Building 6, Suite 140
Oklahoma City, Oklahoma 73116

Date _____

PURSUANT TO PROVISIONS OF TITLE 51, OKLAHOMA STATUTES 1981, SECTION 24A.1 et seq. AND PROCEDURES OUTLINED BY THE OKLAHOMA STATE BUREAU OF INVESTIGATION, I REQUEST A CRIMINAL HISTORY INFORMATION CHECK OF YOUR FILES ON THE FOLLOWING SUBJECT(S). THE PROCESSING FEE OF FIFTEEN DOLLARS (\$15.00) PER SUBJECT IS HEREBY TENDERED.

Form of Payment: Cash Business Check Money Order Cashier's Check

Visa Master Card Discover Account Number _____

Cardholder's Signature: _____ Expiration Date: _____
(Requests with no signature will be returned unprocessed.)

NAME OF INDIVIDUAL, BUSINESS,
OR AGENCY MAKING REQUEST : _____

If paying with cash, money order, cashier's check or credit card
This information will be YOUR NAME AND ADDRESS.

INDIVIDUAL, BUSINESS,
OR AGENCY ADDRESS : _____
Street Address or Post Office Box

PHONE
NUMBER: _____
City State Zip

Purpose of Request: _____

(PLEASE CHECK, ONLY IF APPLICABLE)
This request is being made in compliance with the provisions of the Oklahoma Child Care Facilities Licensing Act, 10 O. S. 1991, Sections 401 through 410; a search of the Oklahoma Department of Corrections Sex Offenders Registration List, 57 O. S. 1991, Section 581 et seq., is required: _____. The sex offender search must be requested at the time the original criminal history record check is submitted; amended replies to include this information will not be furnished free of charge at a later date.)

FOR OSBI USE ONLY, DO NOT WRITE IN THIS SPACE.

Signature of Requestor

SUBJECT TO BE SEARCHED:

(All request forms must be typed or the information legibly printed in ink by the requestor; forms completed in pencil are unacceptable. Handwritten requests which are not easily read will be returned unprocessed.)

NAME: _____
(Last First Middle)

Alias Names: _____ (includes
maiden name, all married names, and any other names used)

RACE: _____ SEX: _____

DATE OF BIRTH OR
AGE (mandatory): _____

(If an age is provided, it must be specific; an age range is not acceptable and will be returned unprocessed. Additionally, customers who submit common names with an age may be required to provide a full date of birth before their request can be processed. See Title 51 section 24A.5 (2) of the Oklahoma Open Records Act.)

SOCIAL SECURITY
NUMBER: _____

FOR OSBI USE ONLY, DO NOT WRITE IN THIS SPACE

All criminal history record information provided in compliance with 51 O. S. 1981, Section 24A.1 et seq., is based upon fingerprints taken by the contributing law enforcement or criminal justice agency at the time of arrest and/or incarceration. (Form #CHRD01)