School Employee and Volunteer Criminal History Records Check	RSA 189:13-a
Addendum	

This is an addendum to the technical advisory regarding School Employee and Designated Volunteer Criminal History Records Checks, which was issued on July 28, 2016.

This addendum is issued as a supplement to the Technical Advisory regarding school employee and designated school volunteer criminal history records checks. As discussed in that Technical Advisory, pursuant to the amended version of RSA 189:13-a, when a person who is seeking employment at a school submits the Criminal Record Release Authorization Form, School Employee Criminal History Records Check,¹ the Department of Safety will report back to the perspective employer via a letter whether the applicant has any felony or misdemeanor convictions. Specifically, the superintendent or chief executive officer can expect to see one of the following responses in the letter from the Department of Safety:

- The applicant has a felony conviction(s);
- The applicant has a conviction or a pending charge of a crime under Section V of NH RSA 189:13-a and accordingly, shall not be hired by a school administration unit, school district, or charter school;
- The applicant has a misdemeanor conviction(s); or
- The applicant has no criminal history record information.

As stated above, the letter from the Department of Safety will not provide any specifics regarding any conviction that might be on the applicant's criminal background. However, if the superintendent or chief executive officer is interested in obtaining the applicant's New Hampshire criminal conviction record in addition to receiving the letter from the Department of Safety, then there is an additional form that the applicant should be asked to submit. Specifically, the applicant can fill out the New Hampshire Criminal History Record Information Release Authorization Form.² This form can be submitted to the Department of Safety simultaneously with the Criminal Record Release Authorization Form, School Employee Criminal History Records Check form, which was discussed above. There is a \$25.00 fee associated with the New Hampshire Criminal History Record Information Release Authorization Form, which the applicant will be required to pay.

This additional release will provide the superintendent or the chief executive officer with any convictions that the applicant may have within the State of New Hampshire. It is important to

² A copy of the New Hampshire Criminal History Record Information Release Authorization Form is attached to this memo.

Issued by:
Virginia M. Barry, Ph.D.

Date Issued:
September 27, 2016

Addendum to TA issued
July 28, 2016

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¹ A copy of the Criminal Record Release Authorization Form, School Employee Criminal History Records Check is attached to this memo.



School Employee and Volunteer Criminal History Records Check

RSA 189:13-a

Addendum

note that this additional release *will not provide any out-of-state convictions that the applicant might have.* Therefore, superintendents and chief executive officers should be aware that if the letter from the Department of Safety states that the applicant has a conviction—either felony or misdemeanor—and the New Hampshire Criminal Record does not show a conviction, then a reasonable conclusion that can be reached is that the applicant has an out-of-state conviction. Therefore, it is incumbent upon the superintendent or chief executive officer to take any additional steps that he or she feels are appropriate.³

Contacts for Questions:

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Issued by:

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³ Superintendents or chief executive officers should seek guidance from their school district attorney regarding what steps should be taken in this situation.

New Hampshire Department of Safety **DIVISION OF STATE POLICE**

Central Repository for Criminal Records 33 Hazen Drive, Concord, NH 03305

CRIMINAL RECORD RELEASE AUTHORIZATION FORM

SCHOOL EMPLOYEE CRIMINAL HISTORY RECORDS CHECK - RSA 189:13-a

I hereby authorize the New Hampshire Department of Safety, Division of State Police to release whether or not I have been convicted of any offenses pursuant to RSA 189:13-a. This information shall be released to:

Charles P. Littlefield, Ed.D.
Superintendent of Schools
School Administrative Unit #15
90 Farmer Road, Hooksett, NH 03106

(Name and address of authorized representative of the employing school administrative unit, school district, chartered public school, public academy, non-public school, or other person to receive Criminal History Record response)

PLEASE TYPE OR PRINT CLEARLY

Name:				
	LAST	(MAIDEN)	FIRST	MI
Address:	STREET	CITY	STATE	ZIP
Date of Bir	rth:/	Social Se	curity # (optional):	
	w you are certifying that y Insworn falsification.	ou are the individual listed above a	and that the information provided	is true under penalty of
Releasee's	s Signature:		Date: _	
Notary's S	ignature:		Date: _	
		-or- ☐ INKED - \$49.75 f .50 for Employees and \$		50 for Volunteers
	• .	nust be submitted at the s State of NH – Criminal Re		and this form.



State of New Hampshire

Criminal Records Unit

Department of Safety DIVISION OF STATE POLICE

33 Hazen Drive, Concord, NH 03305

CRIMINAL HISTORY RECORD INFORMATION RELEASE AUTHORIZATION FORM

INSTRUCTIONS

NH RSA 106-B:14 and Administrative Rule Saf-C 5700 authorizes the dissemination of NH Criminal History Record Information (CHRI) for non-criminal justice purposes. In NH, all CHRI is confidential and released only upon the knowledge and permission of the individual of whom the request is made. Individuals requesting their own record in person need only to complete Section I. If the CHRI is to be released to a third party, both Section I and Section II must be completed. All requests by mail must have both sections completed and Section II notarized.

SECTION I (PLEASE PRINT CLEARLY)							
Last Name	First Name	Maiden _	MI				
Address	City	Sta	teZip				
Date of Birth	Hair Color	Eye Color	Male Female				
Driver's License Number		State	_				
My signature below signifies I am the individual listed above and the information provided is true.							
SignatureSigned under penalty of unsworn falsific	cation pursuant to RSA 641:13	Date					
SECTION II I hereby authorize the release of my criminal record conviction(s), if any, to the following:							
Address	City	State	Zip				
Your Signature			Date				
Notary's Signature							
Signature of person/entity to receive re	ecord	(Affix seal)	Date				
RECORD CHALLENGE Saf-C 5703.12 Procedure for Correcting a CHRI (a) Persons or their attorneys desiring access to their CHRI for the purpose of challenge or correction shall appear at the central repository. (b) A copy shall be provided to a person if after review he/she indicates he/she needs the copy to pursue the challenge. (c) Any person making a challenge shall identify that portion of his/her CHRI which he/she believes to be inaccurate or incorrect, and shall also give a correct version of his/her record with an explanation of the reason that he/she believes his/her version to be correct. (d) The director shall take the following actions within 30 days of receipt of challenge: (1) Review the records and contact the law enforcement agency or court which submitted the record to compare the information to determine whether the challenge is valid; (2) If the challenge is valid, which means there is a discrepancy between the information submitted and the information maintained by the law enforcement agency or court, the record shall be corrected and the person and appropriate CJAs shall be notified; and (3) If the challenge is invalid, the person shall be informed and advised of the right to appeal pursuant to RSA 541. (e) When a record has been corrected, the division shall notify all non-criminal justice agencies, to whom the data has been disseminated in the last year, of the correction.(f) The person shall be entitled to review the information that records the facts, dates, and results of each formal stage of the criminal justice process through which he passes, to ensure that all such steps are completely and accurately recorded. WARNING: The Division of State Police is the Criminal Record Repository for the State of New Hampshire. The record you have received is based only on what has been reported to the Repository and may not be a complete Criminal History Record of the named individual.							
To prevent a delay in processing, I ha	ave enclosed a self-addre	ssed envelope.					
Prepaid Acc't Number							
A \$25.00 fee is required for each request. Make checks payable to: State of NH – Criminal Records.							