
New Jersey Administrative Code (N.J.A.C.) 13:59-1 et seq. authorizes the dissemination of New Jersey **criminal history record information** (CHRI) by the New Jersey State Police (NJSP), Identification & Information Technology Section (I&ITS), State Bureau of Identification (SBI) for noncriminal justice purposes. The following entities are authorized to obtain from the SBI all records of convictions in the New Jersey state courts and, regardless of their age, all records of pending arrests and charges for violations of New Jersey laws, unless such records have been expunged.

- Governmental entities of this state, the federal government, or any other state for any official governmental purpose, including, but not limited to, employment, licensing and the procurement of services;
- A person or non-governmental entity of any state, that seeks to directly engage the services of the subject of the record, for the purpose of determining the subject's qualifications for employment, volunteer work or other performance of service;
- Attorneys-at-law licensed by any state for use in any contested matters docketed in any state or federal court or administrative agencies of this state;
- Private detectives licensed by the Division of State Police pursuant to N.J.S.A. 45:19-8 et seq. for the purposes of obtaining information in the furtherance of the performance of their statutorily authorized functions, as specifically enumerated by N.J.S.A. 45:19-9(a)1 to 9.
- A person for the purpose of obtaining his/her personal record request.

Individual Criminal History Record Checks

The Division of State Police, Criminal Information Unit (CIU) provides fingerprint-based criminal history record background checks to any individual requesting a copy of his/her own record. A personal record request is typically for the purpose of:

- GOOD CONDUCT
- IMMIGRATION
- NATURALIZATION
- PERSONAL RECORD
- VISA
- INTERNATIONAL ADOPTION
- FOREIGN BUSINESS
- EXPUNGMENT

Instructions For Obtaining Your Criminal History Record

An individual may obtain a criminal history record check via electronic live scan at one of the approved sites. The New Jersey State Police uses the live scan fingerprinting services provided by MorphoTrust USA, a private company under contract with the State of New Jersey. In order to be fingerprinted for one of the purposes listed above, you are required to contact MorphoTrust USA to schedule a time and place to have your fingerprints captured. The quickest and easiest way to schedule your appointment is via the Web at the URL noted on the Universal Fingerprint Forms below. Web scheduling is available 24 hours per day, seven days per week. Applicants who do not have Web access should call Morpho Trust at the company's toll-free telephone number, 1-877-503-5981 (Monday through Friday, 8:00 a.m. to 5:00 p.m., and Saturday, 8:00 a.m. to 12:00 noon). Spanish-speaking operators are available upon request.

You must download the appropriate Universal Fingerprint Form and bring this form with you to your scheduled fingerprint appointment. In addition to this form, you must bring proper identification as outlined on the form. The home address that you fill out on the Universal Fingerprint Form should be the same as the home address printed on the identification that you provide to MorphoTrust USA. YOUR EMPLOYER / VOLUNTEER ORGANIZATION ADDRESS MUST BE COMPLETE AND ACCURATE, AS RESULTS ARE SENT OUT VIA US MAIL. To ensure accuracy, please legibly complete blocks #9 thru #26 on the front of the form prior to scheduling your appointment.

The fee for this service is **\$40.69**, which includes the \$10 vendor fee and associated state sales tax. The following forms of payment are accepted: VISA, Master Card, American Express, Discover, prepaid debit cards, or electronic debit (ACH) from a checking account. Accounts will be debited immediately. At the time of scheduling your appointment, payment will be required and charged to your account.

Appointments must be canceled by 5:00p.m. on the business day prior to your scheduled time (you must cancel by Saturday at noon for a Monday appointment). If you fail to cancel your scheduled appointment prior to these deadlines, you will forfeit the \$10.69 portion of your fingerprint fee that is payable to Morpho Trust. You will also forfeit the \$10.69 portion if you fail to bring the Universal Fingerprint Form and proper ID when reporting to your fingerprinting appointment.

Failure to utilize the Universal Form for its intended purpose and/or failing to provide complete and accurate information may result in having to be fingerprinted again and incurring additional costs. Questions or revisions to responses must be made within a ninety-day period or the full process will have to be completed again. If you do not receive your response within 10 working days please contact the Criminal Information Unit.

Any questions regarding the use of this form can be directed to the New Jersey State Police, Criminal Information Unit at 609 882-2000 ext. 2918

Please select from the following background checks below:

FORM A - (PDF 101kb)

Applicants that require one of the following fingerprint-based background checks and need the results mailed back to the applicant's address must use form "A". (A Criminal Hit will result in full disclosure of criminal record)

- Good Conduct
- Immigration
- Naturalization
- Personal Record
- Visa
- Expungement

FORM B - (PDF 101kb)

Applicants that require one of the following fingerprint-based background checks and need the results **notarized** and mailed back to the applicant's address must use form "B". (A Criminal Hit will result in full disclosure of criminal record)

International Adoption Requiring Notarization

Foreign Business Requiring Notarization

PDF files require a free reader available from [Adobe](#).

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Noncriminal Justice Licensing / Employment Requests

N.J.A.C. 13:59-1 et seq. provides background checks for noncriminal justice licensing or employment to the following: :

- Governmental entities of this State, the federal government or any other state for any official governmental purpose;
- A person or non-governmental entity of any State for employment, volunteer work or other performance of services;
- Private detectives, licensed by the Division of State Police, for the purposes of obtaining information pursuant to their statutorily authorized functions

There are two (2) options available to a requester to conduct a noncriminal licensing / employment check.

State Fingerprint Check

A requester may elect to conduct a more thorough check, based on a fingerprint comparison by using the proper Universal Fingerprint Form provided in this section. The fee for electronic fingerprinting is \$40.69.

FORM C - (PDF 101kb)

Applicants that require a fingerprint-based criminal history record check for employment purposes and need the results mailed back to the applicant's address must use form "C". (A Criminal Hit will result in the disclosure of convictions and pending data only)

Employment - response returned to applicant

(If response needs to be returned directly to employer use Form D)

FORM D - (PDF 101kb)

Applicants that require a fingerprint-based criminal history record check for employment purposes and need the results mailed back to the employer address must use form "D". (A Criminal Hit will result in the disclosure of convictions and pending data only)

YOUR EMPLOYER ADDRESS MUST BE COMPLETE AND ACCURATE, AS RESULTS ARE SENT OUT VIA US MAIL.

See complete instruction on downloaded forms.

Employment - response returned to employer

(If response needs to be returned directly to applicant, use Form C)

PDF files require a free reader available from [Adobe](#).

Any questions regarding the information on these forms, or if you fail to receive your response after ten (10) working days once fingerprinted, can be directed to the New Jersey State Police, Criminal Information Unit at 609 882-2000 ext. 2918.

Name Check

The SBI 212B Form was developed to provide the following entities with the ability to request **named-based only** criminal history record checks by submitting a subject's name, date of birth, social security number, and other descriptive information:

- Governmental entities of this State, the federal government or any other state for any official governmental purpose;
- A person or non-governmental entity of any State for employment, volunteer work or other performance of services;
- Private detectives, licensed by the Division of State Police, for the purposes of obtaining information pursuant to their statutorily authorized functions.

If an authorized requester elects to conduct a more thorough check, based on fingerprint comparison, he/she may use Universal Fingerprint Form D. These responses will go directly back to the employer address that was listed on the Universal Form completed by the applicant.

SBI 212B requests can now be submitted online using the following URL:

<https://www.njportal.com/njsp/212b/>

The fee for an SBI 212B online submission is \$20, payable by credit or debit card. Valid email addresses must be provided for both the requester and subject of the name-based criminal history record check. Payment can be made by either the requester or the subject, but the subject must consent to the criminal history record check via the online verification process (with the exception of licensed private detectives performing their statutorily authorized functions.)

The fee for online submissions by volunteer organizations (as defined below) is reduced to \$12.

Licensed private detectives will need to setup an account on the website prior to submitting SBI 212B requests.

SBI 212B Forms MAY NOT be used for a person requesting his/her own criminal history record. Anyone wishing to receive his/her own record must submit fingerprints by utilizing Form A or B above, in accordance with N.J.A.C. 13:59-1 et seq.

Further questions regarding obtaining criminal history record background checks or noncriminal justice licensing/employment checks should be directed to the **Criminal Information Unit, (609) 882-2000, extension 2918.**



New Jersey Universal Fingerprint Form

www.bioapplicant.com/nj

(1) Originating Agency Number (ORI #) NJPRR0000		(2) Category PRX		(3) Statute Number 13:59-1	
(4) Reason for Fingerprinting PERSONAL RECORD REQUEST				(5) Document Type S1	(6) Payment Information \$40.69
(7) Contributor's Case # (Unique Identifier) PRR				(8) Miscellaneous FORM "A"	
(9) First Name		(10) MI		(11) Last Name	
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(16) Weight		(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)	
(19) Country of Citizenship					
(20) Home Address					
Address		City		State	Zip
(21) Gender (Select one) [] Female [] Male [] Both		(22) Hair Color	(23) Eye Color	(24) Race (Select One) [A] Asian/ Pacific Islander (includes Asian Indian) [B] Black [I] American Indian / Alaska Native [W] White (Includes Hispanic/ Spanish Origin) [U] Unknown	
(25) Occupation / Position (with respect to Requirement)		(26) Employer / Organization Name (with respect to Requirement)			
		Employer Address			
		City		State	Zip
Identification Requirement - Acceptable Identification must be presented at the <u>time of printing</u> . Identification presented MUST be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria: Photo, Name, Address (home/employer), Date of Birth. Acceptable ID must be issued by a Federal, State, County or Municipal entity for identification purposes. Examples of acceptable ID are: 1) Valid U.S. State Photo Driver's License/ Non Driver's License, 2) U.S. Passport, 3) USCIS Permanent Resident ID Card (issued after 5/10/2010), and 4) USCIS Employment Authorization Card (issued after 10/31/2010).					

Please READ This Form Carefully:

Follow all of the instructions provided by your agency/employer to complete the fingerprint process. You must have this form (Blocks 1 through 26) completed prior to scheduling your fingerprint appointment via the website or call center. **PLEASE PRINT LEGIBLY.** It is required that you present this completed Universal Fingerprint Form, IDG_NJAPP_020115_V2, at your scheduled appointment.

Appointment Scheduling:

Scheduling is available anytime at www.bioapplicant.com/nj. Appointments may also be scheduled through our Call Center. English and Spanish speaking agents are available at **1-877-503-5981**, Monday through Friday, 8:00AM to 5:00PM EST and Saturday, 8:00AM to 12 Noon EST.

Payment:

When an applicant is responsible for payment, payment is required at the time of scheduling. The following forms of payment are accepted: Visa, MasterCard, American Express, Discover, and prepaid debit cards, or electronic debit (ACH) from a checking account. Accounts will be debited immediately.

Cancel/ Reschedule:

Appointments may be canceled or rescheduled via the website or the call center before the deadline of 5PM EST the business day prior to the scheduled appointment (Saturday Noon for Monday appointments). An appointment fee of \$10.00 plus tax (\$10.69) will be incurred by applicants who do not cancel/reschedule their appointment prior to the deadline. MorphoTrust will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

Unable to be Fingerprinted:

An applicant is considered "Unable to be Fingerprinted" for any of the following reasons: Failure to appear for scheduled appointment, inability to present proper identification, inability to present this completed Universal Fingerprint Form IDG_NJAPP_020115_V2, or the information on this form does not exactly match the information provided during the scheduling process. Applicants unable to be fingerprinted will incur a \$10.00 plus tax (\$10.69) appointment fee. MorphoTrust will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

PCN and Receipts:

Upon the completion of fingerprinting you will be assigned a PCN number. The PCN will be recorded on this form and on your receipt. MorphoTrust will not provide duplicate receipts, PCN Numbers or any appointment/printing information after the time of printing.

Applicant ID Number:	Payment Authorization:	PCN:
Scheduled Day & Date:	Scheduled Time:	Scheduled Site:
Agency Information:		

You **MUST** retain a copy of this form and the receipt of printing for your personal records.

APPLICANTS MUST NOT ALTER, SHARE, OR REUSE THIS FORM

IDG_NJAPP_020115_V2



By MorphoTrust USA

New Jersey Universal Fingerprint Form

www.bioapplicant.com/nj

(1) Originating Agency Number (ORI #) NJPRR0000		(2) Category PRN		(3) Statute Number 13:59-1	
(4) Reason for Fingerprinting PERSONAL RECORD REQUEST				(5) Document Type S1	(6) Payment Information \$40.69
(7) Contributor's Case # (Unique Identifier) NOTARY				(8) Miscellaneous FORM "B"	
(9) First Name		(10) MI		(11) Last Name	
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(16) Weight		(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)	
(19) Country of Citizenship					
(20) Home Address					
Address		City		State	Zip
(21) Gender (Select one) [] Female [] Male [] Both		(22) Hair Color		(23) Eye Color	
(24) Race (Select One) [A] Asian/ Pacific Islander (includes Asian Indian) [B] Black [I] American Indian / Alaska Native [W] White (Includes Hispanic/ Spanish Origin) [U] Unknown					
(25) Occupation / Position (with respect to Requirement)		(26) Employer / Organization Name (with respect to Requirement)			
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(1) Originating Agency Number (ORI #) NJPRR0000		(2) Category PRE		(3) Statute Number 13:59-1	
(4) Reason for Fingerprinting PERSONAL RECORD EMPLOYEE				(5) Document Type S1	(6) Payment Information \$40.69
(7) Contributor's Case # (Unique Identifier) EMPLOYEE				(8) Miscellaneous FORM "C"	
(9) First Name		(10) MI		(11) Last Name	
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(16) Weight		(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)	
(19) Country of Citizenship					
(20) Home Address					
Address		City		State	Zip
(21) Gender (Select one) [] Female [] Male [] Both		(22) Hair Color		(23) Eye Color	
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(4) Reason for Fingerprinting PERSONAL EMPLOYER REQUEST				(5) Document Type S1	(6) Payment Information \$40.69
(7) Contributor's Case # (Unique Identifier) EMPLOYER				(8) Miscellaneous FORM "D"	
(9) First Name		(10) MI		(11) Last Name	
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(16) Weight		(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)	
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