

**South Carolina State Law Enforcement Division
CJIS-NCIC Terminal Operator Certification
SECURITY PROFILE**

Revised 12/06/02; LFM

AGENCY INFORMATION:

Employing Agency _____ ORI _____
Agency Administrator _____ Title _____
Agency _____
TAC _____ Title _____

NCIC CERTIFICATION - APPLICANT PROFILE :

Full Name: Last _____ First _____
Middle _____ Maiden Name _____
Sex _____ Race _____ DOB _____ SOC _____ - _____ - _____
OLN _____ OLN STATE _____
U.S. Citizen? Yes No; High School Graduate or GED? Yes No
Name of High School? _____ H.S. Graduation Year: _____
Do you have a copy of the operator's GED or Diploma? Yes No
Is operator currently NCIC Certified in S.C. through SLED CJIS? Yes No
What level is operator certified? 16 hour; 40 hour; Investigator;
 Instructor.

BACKGROUND INVESTIGATION VERIFICATION SECTION:

NCIC Criminal Records Search (ICHS):

List all other names the candidate has used (maiden, former, married, aka, etc.):

Name: Last _____ First _____
Middle _____
Name: Last _____ First _____
Middle _____
Name: Last _____ First _____
Middle _____
Name: Last _____ First _____
Middle _____

Has an NCIC ICHS search been received on the candidate using all of the names above? Yes No

Date of transaction: _____

Was a criminal record found based on the NCIC (ICHS) search? Yes No.
(If so, conduct ICHR: FBI Number _____ and notify SLED CJIS Training ASAP)

NLETS Criminal Records Search (IQ):

List all states the candidate has resided in: _____

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IQ State ___ **Date** _____

Was a criminal record found based on the NLETS search (IQ) conducted using all of the former states of residence? Yes No

(If so, FQ State ___ SID Number _____ AQ ORI(s) _____
_____ and contact SLED CJIS Training ASAP).

Fingerprint Based NCIC Criminal Records Search:

Have (2) fingerprint cards been submitted to SLED and the FBI? Yes No

Does the candidate possess any criminal record based on the fingerprint search?

Yes No Have Not Received Results Yet

(If yes, notify SLED CJIS Training ASAP)

Was any criminal record found as a result of your investigation? Yes No

(NOTE: Forward any record found on this candidate, including final disposition, with this form to the Control Terminal Officer for SC).

I understand the above form must be completed, and is required for registration at any SLED CJIS NCIC Certification class. Failure to produce this form on registration day, the absence of proof of a high school diploma or GED, or the lack of evidence that an appropriate criminal records background check, based on this form, was completed, may result in cancellation.
TAC or Authorizing Signature: _____.

ATTESTATION AND VERIFICATION OF CANDIDATE

I hereby attest and affirm that the information supplied herein is true to the best of my knowledge. I understand if I am employed, falsified statements on this application may be considered sufficient cause for dismissal depending on my agency's policy.

Applicant's Signature: _____ Date: _____

ATTESTATION AND CRIMINAL JUSTICE AGENCY VERIFICATION

Revised 12/06/02; LFM **Agency:** _____
I certify that I have reviewed the above application for training and NCIC Certification and find it to be true and correct in all respects and in accordance with SLED CJIS and NCIC policy. I further certify that based on all information available to me; including the background investigation conducted on: Month/Day/Year: _____ thru Month/Day/Year: _____ by this agency, that the applicant is of good character.

Date: _____ **TAC or Alternate TAC Signature** _____

Date: _____ **Agency Administrator** _____

Sworn to and subscribed before me this _____ day of _____

**Notary Public for South Carolina
My commission expires: _____**

PROCEDURES FOR REVIEW OF CHRI IN QUESTIONS OF NCIC ACCESS

Pursuant to the personnel security procedures for the National Crime Information Center (NCIC), the Chief of SLED, as executive head of the Control Terminal Agency (CTA), authorizes the state Control Terminal Officer (CTO) to review criminal history record information on all persons applying for employment and/or NCIC access. No person will be allowed access to NCIC or the state CJIS network in any case where a record check reveals:

- **A pending indictment,**
- **A felony conviction,**
- **A misdemeanor conviction if such conviction bears on an individual's fitness for access to sensitive law enforcement information.**

In reviewing unspecified misdemeanor convictions, the CTO may consider the following factors:

- **The nature and seriousness of the crime,**
- **The date of the crime,**
- **The age of the individual at the time of the crime, and**
- **The opinion of the terminal agency CEO regarding the commitment of the individual to protect the integrity of national and state crime information and the probability they will commit future offenses.**

IMPORTANT NOTE: Nothing in this procedure limits the authority of the CTA to deny access after a determination that NCIC or state Criminal Justice Information System access would not be in the public interest.

**IF A CRIMINAL RECORD IS FOUND THE CEO FOR THAT AGENCY MUST SIGN THE
SECURITY STATEMENT.**

Reference: _____
(Name of Applicant)

As the Chief Executive Officer for the terminal agency employing or proposing to employ the applicant named above, it is my opinion that the applicant is committed to safeguard national and state crime information. I have considered all background investigation results and recommend him/her for NCIC certification.

(Signature of CEO) **CEO for:** _____

Date: _____

**SLED CJIS-NCIC Certification
Terminal Operator Add/Modify/Delete Form**

SC State Law Enforcement Division
PO Box 21398
Columbia, S.C. 29221-1398
Attention: CJIS Training
FAX: (803) 896-7022

- ADD Certified Operator (New Employee)
 MODIFY Operator's Record (Name, etc.)
 DELETE Cert. Operator (No longer employed)

From: _____ Agency: _____
(TAC or Asst. TAC)

Certified Operator Name:

LAST _____, FIRST _____ MIDDLE _____

Level NCIC Certification: 16-Hour; 40-Hour; Investigator; Instructor

Social Security #: _____ - _____ - _____ DOB: _____

ADD (New Employee):
Did former agency submit original of completed and signed "Security Profile" form?
 Yes; No

Certified Operator has not been more than 30 days since last criminal justice employment?
 Yes; No

Has their been a criminal history completed through NCIC and NLETS in the past two years on the operator? Yes; No

(If "NO" to any of the above, a new "Security Profile" must be completed, keep the original, and submit a copy to SLED CJIS Training)

MODIFY NCIC Certification Records:

NAME: FROM _____
TO _____

Other Modification – Comments: _____

DELETE NCIC Operator from this agency.
Did Certified Operator transfer to another S.C. criminal justice agency? Yes; No
(If yes, please provide name and location of agency: _____)

TACs SIGNATURE: _____ DATE: _____
SLED CJIS Training Section: _____

ATTENDANCE ROSTER -- FINAL

SC Law Enforcement Division
 PO Box 21398
 Columbia, South Carolina 29221-1398
 Attn: CJIS Training

FAX: (803) 896-7022

COURSE TITLE	COURSE #	HOURS	START DATE	END DATE
LOCATION	PRIMARY INSTRUCTOR (PRINT):			
INSTRUCTIONS: Complete Name, Agency, ORI, and Social Security Number sections only. This information will be utilized for certificates and entry into training records (Social Security # is required for this purpose). This roster may be faxed to "CJIS TRAINING". FAX : (803) 896-7022 PLEASE TYPE OR PRINT LEGIBLY IN INK. NOTE: Copy of "Security Profile" must be submitted for EACH student below.				

#	Attendee Name (Last, First MI)	Agency	ORI #	Social Security #	Pass/Fail	M	T	W	T	F
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
16.										
17.										
18.										
19.										
20.										
21.										

I HAVE SUBMITTED A COMPLETED COPY OF A SIGNED "SECURITY PROFILE" FOR EACH STUDENT? YES NO
 I certify the above information is true and correct. (If "NO," students will not be certified)

NCIC Instructor's Signature _____ **Date:** _____