



North Valley Animal Disaster Group Standard Operating Guidelines

Title: BACKGROUND CHECKS

Objective: To provide guidance for mandatory background checks for responding volunteers

Description:

All NVADG volunteers shall pass a background check before being issued a Disaster Service Worker Identification badge.

- It is a requirement of Butte County that all volunteers pass a background check.
- Volunteers who joined before December 31, 2019 received a one-time in-house background check provided by Butte County Sheriff's Office that contains no monitoring criteria. Between January 1, 2020 and December 31, 2022, Live Scans were not required for these "grandfathered" volunteers. **CHANGE: As of January 1, 2023, the Butte County Sheriff requires all volunteers who joined before December 31, 2019 to obtain Live Scans by February 15, 2023.** All volunteers are now required to pass a Live Scan background check and monitoring.
- Volunteers are required to obtain (and pass) a Live Scan Fingerprint Application before being issued a Disaster Service Worker Identification Card.
- Monitoring: All volunteers will be monitored for any criminal action. Any activity will be reported to Butte County Sheriff's Office. Butte County (not NVADG) will make the determination if the event is serious enough for termination.
- Individual Originating Agency Identification Number: The monitoring system for new volunteers requires an individual Originating Agency Identification (ORI) Number. This permits each agency to get a notification that somebody has had a reportable event. There must be a different number – and Live Scan – for each agency requesting notification. So even if you had a Live Scan for another agency yesterday, new volunteers will be required to get an additional Live Scan – and submit the "new" Originating Agency Identification (ORI) Number.

- Fees: The Background Check is to be done at your convenience, at any authorized location – and your cost.
- If getting a Live Scan at any other facility than the Butte County Sheriff's Office, a copy of the "Request for Live Scan Service" will be sent to Butte County Sheriff's Office.
- Confidentiality: The results of the background check will be kept confidential. Any possible problems/conflicts will be discussed and decided on an individual basis. NVADG never sees any initial or monitoring results – only the final decision by Butte County.
- You will not be issued a Disaster Service Identification Card until successfully passing a background check. However, a new NVADG volunteer that is in the process of completing the background check may respond to an activation as a trained convergent volunteer, as long as they have participated in the NVADG 16-hour Awareness class, and taken the Disaster Service Worker oath. These volunteers will be considered at the lowest level of security clearance and will be utilized in a position where sensitive information is not readily available. A temporary ID badge may be supplied, but until the Background Check has been passed, the official DSW ID badge may not be assigned.
- It is not mandatory for every student who participates in the Annual Training to receive a background check; it is permissible to audit the class. However, no Disaster Service Worker Identification Badge will be distributed, and the student will not be eligible for deployment. All fees are still required - except the Live Scan/Notary fee for the background check.
- Within two weeks of the Annual Training, the applicant will obtain a Live Scan. If this isn't done, you will be removed from the database.
- It is up to the volunteer to inform NVADG if they are resigning from NVADG. This will trigger a "No Longer Interested" (NLI) to Butte County, that will suspend the criminal activity monitoring.
- Butte County will purge their records of non-active volunteers on a regular basis. Refer to the Volunteer Requirements SOG for recency requirements.

Refer to the Volunteer Requirements SOG for additional information

Related Documents Attached: Butte County Live Scan Form



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

CA0040000

ORI (Code assigned by DOJ)

Non-Sworn

Authorized Applicant Type

NAVDG Volunteer

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Butte County Sheriff's Office

Agency Authorized to Receive Criminal Record Information

06411

Mail Code (five-digit code assigned by DOJ)

5 Gillick Way

Street Address or P.O. Box

Cameron Camp

Contact Name (mandatory for all school submissions)

Oroville

City

CA

State

95965

ZIP Code

(530) 538-7494

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name: (AKA or Alias)

Last Name

First Name

Suffix

Sex Male Female

Date of Birth

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing

Number 120078 (Applicant pays rolling fees)

(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc.

Number

(Other Identification Number)

Home

Address Street Address or P.O. Box

City

State

ZIP Code

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: DOJ FBI

(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

Telephone Number (optional)

City

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis
Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170



REQUEST FOR LIVE SCAN SERVICE

Privacy Act Statement

Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.



REQUEST FOR LIVE SCAN SERVICE

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.²
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) *You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>.*

¹ Written notification includes electronic notification, but excludes oral notification

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 28 CFR 50.12(b)

⁴ See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)



KORY L. HONEA
SHERIFF - CORONER

AUTHORIZATION TO RELEASE INFORMATION AND WAIVER OF RIGHTS NON-SWORN/MISC. APPLICANT

I am an applicant for the Butte County Sheriff's Office sponsored North Valley Animal Disaster Group (NAVDG) for the position of Volunteer and will be assigned to volunteer throughout Butte County to assist during emergencies and to help the public become better prepared for emergencies. Due to my prospective assignment, I am required to participate in an investigation into my fitness to service in this capacity.

I hereby direct you, your organization, its Custodian of Records, and/or persons in your employ to release any and all information which you may have concerning me, including information which may be of a confidential privileged and/or derogatory nature, including, but not limited to: employment information, official employment documents, employment performance data, character reference information, educational records and transcripts (pursuant to Public Law 93-380), medical, surgical, psychological, and dental records if I am offered employment with this agency (pursuant to the Medical Information Act, Civil Code Section 56 et. Seq. And C.F.R. 1630), credit and financial information (pursuant to the Banking Privacy and Fair Credit Reporting Acts), local criminal history information (pursuant to Penal Code Section 13300[b] [10]), and/or any other information that you possess.

I exonerate, release and discharge you, your organization, its officers, agents and assigns, from any liability or damages, whether in law or in equity, now and in the future, for furnishing any truthful information requested by the bearer of this authorization form.

_____ I hereby waive my right, pursuant to California Civil Code Section 1786.53 to receive copies of matters of public
Initial here record obtained through the background process. This waiver does not affect my ability to review any non-confidential
Information contained in my background investigation at its completion.

**I understand and acknowledge that any information secured, pursuant to this required background investigation, which would
negatively reflect on my fitness for duty will be forwarded to my current law enforcement employer.**

This release will expire one (1) year after the date of signature.

Dated this _____ day of _____, 202__, in the County of Butte, State of California.

Signature of Applicant

Printed name of Applicant

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
) ss.
County of _____)

On _____, before me, _____, Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public in and for said state