Utah National Guard Security Questionnaire for Non-CAC Positions

State Employee and State Contractors support military personnel or operation. Many positions do not require a federal background investigation, but we still need to protect the personnel, their families, and operations. This form allows us to necessary background checks on low-risk positions.

All questions on this form must be answered completely and truthfully in order that the Utah National Guard may make the determinations described below on a complete record.

Failing to answer any questions completely and truthfully could result in an adverse personnel action against you. Your truthful responses nor information derived from those responses will be used as evidence against you in a subsequent criminal proceeding.

Purpose of this Form

This form will be used by the Utah National Guard in conducting background investigations and reinvestigations of persons under consideration for, or retention of, low risk positions.

Providing this information is voluntary. If you do not provide each item of requested information, however, we will not be able to complete your vetting which could adversely affect your eligibility for a position or your ability to obtain or retain state or contract employment,

It is imperative that the information provided be true and accurate, to the best of your knowledge.

Any information that you provide is evaluated based on its currency, seriousness, relevance to the position and duties, and consistency with all other information about you. Withholding, misrepresenting, or falsifying information may affect your eligibility for positions or your ability to obtain or retain state or contract employment

Withholding, misrepresenting, or falsifying information may also negatively affect your employment prospects and job status.

Persons Completing This Form Should Begin After Carefully Reading The Preceding Instructions.				
I have read the instructions, and I understand that if I withhold, misrepresent, or falsify information on this form, I may be subject to the penalties for inaccurate or false statements.	YES	OZ		

Your Full Name							
Provide your full name							
Last	First		Middle				Suffix
Your SSN							
Provide your U.S. Social So	ecurity Number.						
Your Birth Information	· · · · · · · · · · · · · · · · ·						
Provide your date of birth.			Gender at Bir				
Your Place of Birth			(required for I	BCI)			
Provide your Place of birth.	City		State		Cou	ntry	
Other Names If Used (o ptional) (maiden	names, nickn	ames, etc.)				
Your Contact Informati	on						
Email address			Mobile/Cell N	lumber			
Selective Service Reco	rd					YES	NO
Were you born a male after	December 31, 195	59?					
Have you registered with the Selective Service System (SSS)?							
Provide registration numbe	r:			1			,
Where You Have Lived							
List the places where you has Residences for the entire p				and workin	g back	3 years.	
Full Address			ate (MM/YYYY)	To I	Date (M	M/YYYY)	
						CURREN	Т
Your Military History						YES	NO
Have you EVER served in t	the U.S. Military?						
Provide the branch of service you served in: Provide your dates of service:							
			SEI VICE	•			

Where You Have Worked				
List the places where you have worked the past 3 years. Work for the entire period must be accounted for without breaks.				
Name of Employer	From Date (MM/YYYY)	To Date (MM/YYYY)		

Concerning Your Employment Activities	YES	NO
In the past 5 years have you been:		
• Fired from a job?		
• Quit a job after being told you would be fired?		
 Have you left a job by mutual agreement following charges or allegations of misconduct? 		
 Left a job by mutual agreement following notice of unsatisfactory performance? 		
 Received a written warning, been officially reprimanded, suspended, or 		
disciplined for misconduct in the workplace, such as violation of a security policy?		
If you also a complete on Fourteenstiers Dans		
If yes, please explain on Explanations Page		

Concerning Your Employment Activities	YES	NO
Have you ever worked for the United States Government?		
Have you ever worked for the State of Utah?		
If yes, please explain on Explanations Page		
Your Police Record	YES	NO
In the last five (5) years:		
 Have you been issued a summons, citation, or ticket to appear in court in a criminal proceeding against you? (Do not check if all the citations involved traffic infractions where the fine was less than \$300 and did not include alcohol or drugs.) Have you been arrested by any police officer, sheriff, marshal or any other type of law enforcement official? Have you been charged with, convicted of, or sentenced for a crime in any court? (Include all qualifying charges, convictions or sentences in any Federal, state, local, military, or non-U.S. court, even if previously listed on this form). Have you been or are you currently on probation or parole? Are you currently on trial or awaiting a trial on criminal charges? 		

Your Court Records		YES	NO
Is there currently a domestic violence protective order or restraining orde against you?	er issued		
If yes, please explain on Explanations Page			
Are you currently required to register as a sex offender? Or have you ever had as a sex offender in the past?	d to register	ſ	
If yes, please explain on Explanations Page			
Your Investigations and Clearance Record		YES	NO
Has the U.S. Government EVER investigated your background and/or granted you clearance eligibility/access?	a security		
If yes, Provide the investigating agency:			
Your Use of Illegal Drugs and Drug Activity		YES	NO
 In the last year have you: Illegally used any drugs or controlled substances. Been involved in the illegal purchase, manufacture, cultivation, trafficking, production, transfer, shipping, receiving, handling or sale of any drug or consubstance? Intentionally engaged in the misuse of prescription drugs, regardless of whom not the drugs were prescribed for you or someone else? Voluntarily sought or have been ordered, advised, or asked to seek counse. 	nether or		
If Yes, please explain on Explanations Page			
Concerning Your Employment Activities		YES	NO
Have you ever worked for the United States Government?			
Have you ever worked for the State of Utah?			
If yes, please explain on Explanations Page			
Certification			
My statements on this form, and on any attachments to it, are true, comple of my knowledge and belief and are made in good faith. I have carefully reainstructions to complete this form. I understand that intentionally withholdin falsifying information may have a negative effect on my employment prospersional statements.	ad the fore g, misrepr	egoing esenting,	
Signature	Date		
Signature	Date		

Explanations	

Authorization and Release

I understand that my personal information including name, DOB, SSN and fingerprints will be used for the purpose of conducting a records search through applicable state and federal databases. This information will be used by the Utah National Guard to determine my eligibility for employment with the Utah National Guard or access Utah National Guard facilities

I authorize representatives of the Utah National Guard to request criminal record information about me from criminal justice agencies or systems for the purpose of determining my suitability or eligibility for appointment to, or retention in, low risk positions.

I understand that I may request a copy of such records as may be available to me under the law.

I understand that the only individuals who will have access to detailed information are those involved in the suitability process including the Utah National Guard, Utah DHRM, and the Utah Governor's Office.

Photocopies of this authorization with my signature are valid. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the Utah National Guard, whichever is sooner.

**Until the completion of the background check, I understand I may be denied unsupervised access to children, vulnerable adults or to the privilege in which the background check pertains to. I will provide a list of all criminal convictions which contains a description of the crimes and the particulars of the convictions. I have read the attached Privacy Statement and understand my rights according to this statement.

Before a determination is made, I understand that I will be afforded a reasonable amount of time to challenge the completeness and accuracy of the record through the procedures established the Utah National Guard.

Signature		
Signature	Date	

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.

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	As of 03/30/2018
I acknowledge that I have received a copy of this.	
Signature	

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United

States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy
 of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot 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.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

Updated 11/06/2019

¹ Written notification includes electronic notification, but excludes oral notification.

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

³ See 5 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); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).

UTAH NATIONAL GUARD RECORD CHECK WORKSHEET

NAME				
SSN:				
DOB:			POB	3:
ADDRESS				•
			FIN	GERPRINTS
DATE:		HIT:		NO:
	<u>.</u>			
				CHANGE
DATE:		HIT:	YES:	NO:
				B O I
DATE			\/E0	BCI
DATE:		HIT:	YES:	NO: