

REQUEST FOR PREDETERMINATION OF CRIMINAL HISTORY

THIS IS NOT AN APPLICATION FOR LICENSURE.

Pursuant to §54.1-204 of the *Code of Virginia*, a person shall not be refused a license, certificate, or registration to practice, pursue, or engage in any regulated occupation or profession solely because of a prior criminal conviction, unless the criminal conviction directly relates to the occupation or profession for which the license, certificate, or registration is sought.

An individual who does not possess a credential may use this form, pursuant to §54.1-204.1 of the *Code of Virginia*, to request a predetermination of whether his or her criminal record would disqualify him or her from being credentialed.

By submitting this Request, you are seeking a review of your criminal record to determine whether your criminal record may disqualify you from receiving a license, certificate, registration, or other authority to engage in the particular occupation, trade, or profession you identified in your Request. It is an **optional, preliminary** step that occurs **prior to applying for licensure**. This Request will result in a board determination that will be binding on all future applications whether disqualified or not. **Please note that a determination that you are disqualified under this process will be permanently attached to your DPOR file and may not be reconsidered or overturned by the board at a later date.**

This form is to be submitted directly to DPOR/Board Section at the address provided above.

INFORMATION

- Full Legal Name (As it appears on your government issued ID or other legal documentation)

Last (required) First (required) Middle Generation

Maiden or Former Name(s): _____

- Date of Birth: _____
MM/DD/YYYY

- Mailing Address: _____
(PO Box accepted)
- _____
City State Zip Code

- Physical Address: _____
(PO Box **NOT** accepted)
- ☐ Check here if Street Address is the same as the Mailing Address listed above.
- _____
City State Zip Code

- Provide one of the following identification numbers*:

☐ Individual - Social Security or

☐ Virginia DMV Control Number:

➤ Enter the same identification number as used on examination, previous applications or licenses on file with the Department.

* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

- Contact Numbers: _____
Home Cell Work

➤ E-mail Address: _____

Email address is considered a public record and will be disclosed upon request from a third party.

➤ Board: _____

➤ License Type: _____

➤ Do you currently hold any professional licenses with the Department of Professional and Occupational Regulation?

No ☐

Yes ☐ If yes, provide the Virginia license number(s) below:

License Number: _____

License Number: _____

License Number: _____

License Number: _____

➤ Do you currently hold, or have you ever held, any professional licenses in another state or U.S. territory?

No ☐

Yes ☐ If yes, provide the license number(s) and state(s)/jurisdiction(s) below:

| State/Jurisdiction | License, Certification or Registration Number |
|--------------------|---|
| | |
| | |
| | |
| | |

CRIMINAL CONVICTIONS

What type of conviction should be reported to the Board?

➤ **A "Conviction" includes:**

- Any local, county, state or federal misdemeanor and felony conviction, and all military and foreign convictions.
- Guilty verdict by judge or jury, a plea of guilty, or a plea of nolo contendere (or "no contest").
- A Conviction as a minor (under 18 years of age) **if tried as an adult**.

➤ **The following should NOT be reported:**

- A Conviction pardoned, dismissed, set aside, reversed, or expunged.
- Any violations adjudicated as a minor in the juvenile court system.

Complete the following table for each conviction and provide a **state or national Criminal History Report** for each entry*:

| State/Jurisdiction | Conviction | Type of Conviction | Date of Conviction | Disposition (probation, parole, fine, sentence, etc.) | Current Status |
|--------------------|------------|---|--------------------|--|---------------------------------------|
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated |
| | | | | | <input type="checkbox"/> On Probation |
| | | | | | <input type="checkbox"/> On Parole |
| | | | | | <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated |
| | | | | | <input type="checkbox"/> On Probation |
| | | | | | <input type="checkbox"/> On Parole |
| | | | | | <input type="checkbox"/> None |

| State/Jurisdiction | Conviction | Type of Conviction | Date of Conviction | Disposition (probation, parole, fine, sentence, etc.) | Current Status |
|--------------------|------------|---|--------------------|---|---|
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |
| | | <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | <input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole <input type="checkbox"/> None |

* If criminal history records are no longer available due to length of time that has passed since the conviction, state that the records are no longer available and include a letter from the appropriate agency/police department, and/or court records custodian confirming the unavailability of the records.

- On a separate piece of paper, for each conviction, you may:
 - A. Provide a detailed explanation of the facts and circumstances that led to your conviction.
 - B. Describe in detail your conduct and work activities before the conviction.
 - C. Describe in detail your conduct and work activities after the conviction.
 - D. Explain how you have changed as a result of your conviction. Include a list of all classes; training program(s); information on the status of incarceration, parole, or probation; documentation of rehabilitation efforts; and letter(s) of reference. You may provide proofs and certificates.
- You may utilize the [Criminal Conviction Supplemental Form](#) to provide this information.

State/National Criminal History:

- **Virginia** residents may request an original criminal history record by contacting the Virginia State police at www.vsp.virginia.gov or by phone at 804-674-3720 or email background_checks@vsp.virginia.gov.
- A national background check can be requested through the FBI at the following address: www.fbi.gov/services/cjis/identity-history-summary-checks.
- Applicants with a conviction from other jurisdictions (other than Virginia) must provide an original official Criminal History record from each state/jurisdiction in which they have been convicted.

- During this process, the regulatory board or the department may request additional information from the individual if needed. Certified copies of the final order, decree, or case decisions by a court or regulatory agency with lawful authority to issue such order, decree, or case decisions are not required at this time.

ATTESTATION

Read and initial each of the following statements to confirm your understanding and intention to seek a Predetermination of Criminal History by the Board. Please complete each question or your request will be deemed incomplete and will be returned as deficient.

1. You may submit a request for predetermination to the Board at any time, including before you start or complete any training or examination requirements.

_____ I understand the above statement.
Initial

2. If you have ever been convicted of a state, federal, or military crime, you may use this form to request a predetermination of whether your current criminal history will disqualify you from obtaining a license.

_____ I have a criminal history and would like a predetermination of whether it will disqualify me from obtaining a license.
Initial

3. If you have any pending criminal charge(s) against you at the time you submit a petition, the Board will be unable to issue a predetermination and your request will be considered incomplete.

_____ I do not have any pending criminal charges against me.
Initial

4. If you are appealing any of your criminal convictions and a final decision has not been made by the courts, the Board will be required to make a decision on the conviction as it stands. You may consider waiting until the courts render a final decision on your appeal before requesting a disqualification determination.

INITIAL _____ I do not have any pending appeals related to my criminal convictions.
ONLY Initial

ONE: _____ I am currently in the process of appealing my criminal convictions. I understand that the Board will be required to make a determination on the criminal convictions as presented. If I am successful in reversing my conviction, I understand that I will be required to submit a new request for predetermination.
Initial

5. If you choose to submit an application for a license after you receive a predetermination decision, you will still be obligated to meet all current requirements of licensure at that time, pay all applicable fees, and complete the application with all required documentation, including reporting your conviction on the application, and providing a new criminal history record if more than ninety (90) days have passed from submission of request (date the predetermination request was submitted to DPOR).

_____ I understand that I will still be required to meet all current requirements at the time of application for licensure and pay the required fees if I later choose to submit an application for licensure. I will also be required to provide an updated criminal history if more than ninety (90) days have passed since I submitted my predetermination request.
Initial

6. If you fail to disclose any criminal convictions, provide false information related to your criminal convictions, or provide false information in your request for predetermination, the Board may determine that you are disqualified based solely upon your failure to disclose or providing false documentation or information to the Board.

_____ Initial _____ I understand that failure to disclose all criminal convictions, or failure to provide accurate and detailed information in my request for predetermination, may result in the Board making a determination that I am disqualified solely for those reasons.

7. A determination that you are disqualified from obtaining licensure is binding upon the Board and cannot be reconsidered absent a court order or change to your convictions (Example: You successfully appeal and have your conviction reversed). **If you apply for licensure following the Board’s determination that you are disqualified, the application for licensure will be denied.**

_____ Initial _____ I understand that the Board’s determination that I am disqualified is binding upon the Board and would prevent me from being approved for licensure. If the Board determines that I am disqualified, I understand that there is no option to have the Board reconsider their decision.

Department staff have been granted authority by the Board to make a determination on whether an individual's criminal history *does not disqualify* them from obtaining licensure; however, when an individual's criminal convictions may result in disqualification, the matter must be referred for an Informal Fact-Finding ("IFF") Conference and then presented to the Board for a final decision. By filling out this request, you are agreeing to your case being referred for an IFF Conference if a Board decision is required.

If, after review of the above statements and initialing each statement, you wish to move forward with requesting a Predetermination of Criminal History, please ensure this form is filled out in its entirety and submit all required documentation. **If you fail to complete any portion of this form, or fail to provide the required documentation, your request will be deemed incomplete and will be returned unprocessed as deficient.**

SIGNATURE

I, the undersigned, certify that the foregoing statements and answers are true, and that I have not suppressed any information that might affect the Board's decision to approve my pending request.

Signature _____ Print Name _____ Date _____

Requests for predeterminations and supporting documents may be subject to disclosure under the Virginia Freedom of Information Act.