



Florida Certification Board Pre-Application Background Review

CRIMINAL HISTORY POLICY

The FCB requires all applicants to indicate whether or not they have a criminal history that includes a felony or first-degree misdemeanor conviction. All applicants must have a clean criminal record for a minimum of three-years from the date of release from all court ordered sanctions, which includes all probation and supervision sanctions. If you are concerned that your criminal, other certification or licensure, or professional background may disqualify you from certification, you may request a *Pre-Application Background Review*. This review must be requested and conducted before applying for certification and paying the certification application fee.

For additional information, please review the Background History Policy in the *Candidate Guide: Application Process*.

DIRECTIONS

The *Pre-Application Background Review* is for those individuals who are unsure if they meet the three-years clean criminal record or other background requirement. Prior to completion of the form, you must create a profile/account at www.flcertificationboard.org. This step is required in order to process your payment. This form is to be completed and submitted prior to applying for certification. There is a non-refundable fee of \$50.00 to request the review. All information must be TYPED. Handwritten forms will be denied.

Please submit the form and fee directly to the FCB.

Mail: Florida Certification Board
Attn: Certification Operations
1715 South Gadsden Street
Tallahassee FL 32301

Email: twescoat@flcertificationboard.org or
admin_assist@flcertificationboard.org
Fax: 850-222-6247
Subject Line: Authorization for Criminal Background

Once the review has been completed, you will receive an email and letter indicating the results of the criminal history screening.

Please note: This form and screening is not eligible for the CRRRA credential, which requires a Level 2 Background Screening per the state of Florida.



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All information must be typed. Handwritten forms will be denied.

Section 1 – Contact Information. Please provide the most current information.			
Last Name:		First Name:	
Middle Name:		Maiden Name/Aliases:	
Phone Number:		Email Address:	
Mailing Address:			
City:		State:	Zip Code:
Section 2 – Demographic Data. This information is required in order to complete your review.			
Date of Birth:		Social Security Number:	
Sex:		Race:	
Credential Seeking:			
Section 3 – Payment Information. Screening will not be process until \$50.00 payment is received.			
Payment Method:		Check or Money Order Enclosed (<i>make payable to FCB</i>)	
		Please generate an invoice and contact me by email when the fee is ready to be paid in the FCB online system.	
		Please charge my credit card. I understand there is a \$5.00 convenience fee for manual entry of my credit card.	
Card Type:	VISA	MasterCard	AMEX Discover
Card Number:	Exp. Date		CCV
Name on Card:			
Billing Address:			
Billing City		Billing State	Billing Zip Code
Section 4 – Authorization Signature.			
By my signature, I authorize a criminal background check prior to applying for FCB certification as well as authorization to charge my credit card listed for the amount of \$55.00.			
Signature (<i>FCB accepts manual and electronic signatures</i>)			Date