SOCIALLY NECESSARY SERVICES

POTENTIAL EMPLOYEE CRIMINAL RECORD STATEMENT

West Virginia Socially Necessary Regulations requires that a person PROVIDING Socially Necessary Services complete a Statement of Criminal Record every 2 years. Employees and or Contractors must disclose any conviction. A conviction is any plea of guilty or nolo contendere (no contest) or a verdict of guilty. The fingerprints will be obtained every 5 years and will be used to obtain a copy of any criminal history you have.

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1.	Have you eve	r been convicted of	a crime	in W	est Vii	ginia?					
	Yes	☐ No									
2. Have you ever been convicted of a crime from another state, federal court, military or jurisdiction outside of the U.S.?											
	Yes	☐ No									
3.	3. Have you ever been arrested for a crime against a child or for spousal/ cohabitant abuse?										
	Yes	☐ No					-				
Criminal convictions from another State or Federal court are considered the same as criminal convictions in West Virginia.											
If you answer YES, give details on the back of this page indicating the nature and circumstances of each crime and the date and location in which each crime occurred.											
You must disclose convictions, including reckless and drunk driving convictions even if:											
1.	It happene	It happened a long time ago;									
2.	It was only	It was only a misdemeanor;									
3.	You didn't	You didn't have to go to court;									
4.	You had n	You had no jail time or the sentence was only a fine or probation;									
5.	You receiv	You received a certificate of rehabilitation;									
6.	The convid	The conviction was later dismissed, set aside or the sentence was suspended.									
NOTE: IF THE CRIMINAL BACKGROUND CHECK REVEALS ANY CONVICTION(S) THAT YOU DID NOT DISCLOSE ON THIS FORM, YOUR FAILURE TO DISCLOSE THE CONVICTION(S) MAY RESULT IN TERMINATION OF EMPLOYMENT OR CONTRACTUAL AGREEMENT. I declare under penalty of perjury under the laws of the State of West Virginia that I have read and understand the											
		in this affidavit and t				_				rect.	
Your Name (Print Clearly)							SSN				
Address							Date Birth				
City			State		Zip Code		DMV Num	License ber	е		

Signature:

Date:

Instructions to Respondents:

information:

What was the offense? In which state and city did you commit the offense? State City Date When did this occur? Tell us what happened. (Use additional sheets of paper if needed.) I certify under penalty of perjury that the above information is true and correct to the best of my knowledge. Signature Date

If you have been convicted of a crime in West Virginia or from another state or in federal court, provide the following