

KINNELON RECREATION COMMITTEE
130 Kinnelon Road
Kinnelon, NJ 07405
973-838-5401 ext. 220

Thank you for choosing to volunteer as a Kinnelon Recreation Coach. As a requirement of Public Law 1999, Chapter 432-you are required to complete a successful background check. A copy of this law and applicable Borough Ordinances are available in the Kinnelon Recreation Department for your review.

INSTRUCTIONS FOR VOLUNTEER COACH BACKGROUND CHECK

1. Fill out the attached for IDG_NJAPP_051719_V1 in it's entirety.
2. An appointment must be made for fingerprinting by the applicant. This can be done online at www.bioapplicant.com/nj or by calling 877-503-5981. When scheduling an appointment you will be able to choose a convenient time and location from an extensive list of scan sights available in New Jersey. A fee will be collected from the applicant at the time of scheduling in the amount of \$24.05. As per then Recreation Liaison for the Borough Council (now Mayor), James Freda, this fee will be reimbursed after the fingerprint return has been received by the Kinnelon Chief of Police and if a copy of the IndentoGo receipt and form IDG_NJAPP_020115_V2 has been returned to the Recreation Department.
3. Fingerprinting must be scheduled within two weeks of receiving this packet.
4. Fingerprint results will be sent to the Kinnelon Chief of Police. Based on the content of the return, the Chief of Police will make a recommendation as to the eligibility of the applicant to coach. **The content of all fingerprint returns are confidential and only reviewed by the Chief of Police.**

It is important that you bring the completed attached sheet to your appointment.

Please feel free to contact the Recreation Department with any questions or concerns. Thank you.

(1) Originating Agency Number (ORI #) NJ920610Z		(2) Category YSB		(3) Statute Number 15A:3A-1	
(4) Reason for Fingerprinting YOUTH SERVING ORGANIZATION VOLUNTEER			(5) Document Type VB1		(6) Payment Information \$24.05
(7) Contributor's Case # (Unique Identifier) P11006			(8) Miscellaneous		
(9) First Name		(10) MI		(11) Last Name	
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)			(19) Country of Citizenship
(20) Home Address					
Address		City		State	Zip
(21) Gender (Select one) <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Both		(22) Hair Color		(23) Eye Color	
				(24) Race (Select One) <input type="checkbox"/> Asian/ Pacific Islander (includes Asian Indian) <input type="checkbox"/> Black <input type="checkbox"/> American Indian / Alaska Native <input type="checkbox"/> White (Includes Hispanic/ Spanish Origin) <input type="checkbox"/> Unknown	
(25) Occupation / Position (with respect to Requirement) coach/volunteer		(26) Employer / Organization Name (with respect to Requirement) Kinnelon Borough Employer Address 130 Kinnelon Rd. City Kinnelon State NJ Zip 07405			
Identification Requirement - Acceptable Identification must be presented at the <u>time of printing</u> . Identification presented MUST be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria: Photo, Name, Address (home/Issuing agency), Date of Birth. Acceptable ID must be issued by a Federal, State, County or Municipal entity for identification purposes. Examples of acceptable ID are: 1) Valid U.S. State Photo Driver's License/ Non Driver's License, 2) U.S. Passport, 3) USCIS Permanent Resident ID Card (issued after 5/10/2010), and 4) USCIS Employment Authorization Card (issued after 10/31/2011).					

Please READ This Form Carefully:

Follow all of the instructions provided by your agency/employer to complete the fingerprint process. You must have this form (Blocks 1 through 26) completed prior to scheduling your fingerprint appointment via the website or call center. **PLEASE PRINT LEGIBLY.** It is **required** that you **present** this completed Universal Fingerprint Form, IDG_NJAPP_051719_V1, at your scheduled appointment.

Appointment Scheduling:

Scheduling is available anytime at www.bioapplicant.com/nj. Appointments may also be scheduled through our Call Center. English and Spanish speaking agents are available at **1-877-503-5981**, Monday through Friday, 8:00AM to 5:00PM EST and Saturday, 8:00AM to 12 Noon EST.

Payment:

When an applicant is responsible for payment, payment is required at the time of scheduling. The following forms of payment are accepted: Visa, MasterCard, American Express, Discover and prepaid debit cards, or electronic debit (ACH) from a checking account. Accounts will be debited immediately.

Cancel/ Reschedule:

Appointments may be canceled or rescheduled via the website or the call center before the deadline of 5PM EST the business day prior to the scheduled appointment (Saturday Noon for Monday appointments). An appointment fee of \$12.00 plus tax (\$12.80) will be incurred by applicants who do not cancel/reschedule their appointment prior to the deadline. Idemia Identity & Security will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

Unable to be Fingerprinted:

An applicant is considered "Unable to be Fingerprinted" for any of the following reasons: Failure to appear for scheduled appointment, inability to present proper identification, inability to present this completed Universal Fingerprint Form IDG_NJAPP_051719_V1, or the information on this form does not exactly match the information provided during the scheduling process. Applicants unable to be fingerprinted will incur a \$12.00 plus tax (\$12.80) appointment fee. Idemia Identity & Security will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

PCN and Receipts:

Upon the completion of fingerprinting you will be assigned a PCN number. The PCN will be recorded on this form and on your receipt. Idemia Identity & Security will not provide *duplicate receipts, PCN Numbers or any appointment/printing information after the time of printing.*

Applicant ID Number:	Payment Authorization:	PCN:
Scheduled Day & Date:	Scheduled Time:	Scheduled Site:
Agency Information:		

You **MUST** retain a copy of this form and the receipt of printing for your personal records.

APPLICANTS MUST NOT ALTER, SHARE, OR REUSE THIS FORM