



OFFICE OF BACKGROUND INVESTIGATIONS

P.O. Box 4020

Window Rock, Arizona 86515

Tel: (928) 810-8589

www.obi.navajo-nsn.gov

Fax: (928) 810-8599



PERSONAL INFORMATION

Please print and do not leave any fields blank. If it does not apply, write **NONE**.

Full Legal Name: _____
First Middle Last

Other Names Used: _____
(Maiden, different spelling, etc.)

Social Security No.: _____ Tribal Census No.: _____

Date of Birth: _____ Place of Birth: _____ Gender: Male Female Non-Binary
mm/dd/yy State Only

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ Ethnicity:

- Native American
- African American
- Asian
- Caucasian
- Hispanic

Physical Address: _____
(No P.O. Box)

City _____ State _____ Zip Code _____

Mailing Address: _____

City _____ State _____ Zip Code _____

Daytime Phone No.: (____) _____ Message Phone No.: (____) _____

Email: _____

Identification Card *or* Driver's License

No.: _____ State: _____ Expiration: _____

Has your state driver's license ever been suspended or revoked? Yes No

If so, explain the circumstances and which state(s).

Have you ever received a background check from our office? Yes No

Are you related to anyone from our office? Yes No If yes, please provide name: _____

I hereby understand that I am required to provide accurate and truthful information, and not to omit material information needed to make a decision. Any misrepresentation, falsification, or material omissions in any information that I have provided to the Office of Background Investigations may result in my exclusion from further consideration for employment or termination of employment under NNPPM, Table of Penalties #4 & #5 may apply.

Signature _____

Date _____



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BACKGROUND CHECK RELEASE FORM

I understand that a background check with the Navajo Nation will be conducted by the Navajo Nation Office of Background Investigations pursuant to the Navajo Nation Personnel Policies Manual, Section IV. K. In addition, other additional requirements may apply based on the funding sources of certain Navajo Nation programs.

I authorize the Navajo Nation Office of Background Investigations to conduct a background check on me, to obtain any information relating to my federal, state, local and tribal criminal history records. In addition, civil and administrative records shall be included pursuant to the Navajo Nation Personnel Policies Manual, Section IV.K. and are listed as follows: Navajo Nation courts, Navajo Ethics and Rules Office, White Collar Crime Unit, Navajo Division of Public Safety, Office of the Chief Prosecutor, Department of Personnel Management, Office of the Auditor General and State Motor Vehicle Departments.

I authorize custodians of records and sources of information pertaining to me to release such information upon the request of the Navajo Nation Office of Background Investigations authorized above.

I understand that the information released by record custodians and sources of information is for official use by the Navajo Nation Office of Background Investigations for the sole purpose of determining my suitability as a Navajo Nation applicant, employee, or volunteer.

Full Legal Name: (First Name, Middle Name, Last Name, Suffix i.e., Jr. Sr.)		Date of Birth: (mm/dd/yyyy)	Social Security Number:
Mailing Address:	City:	State:	Zip Code:
Other Names Used (Different Spelling, Nickname, Maiden Name, etc.):			Tribal Census No.:

I hereby certify that I have read the foregoing statement and understand the content, and authorize the release of such records and information about myself.

Signature

Date

NOTARIAL ACKNOWLEDGMENT

State of _____

County of _____

On this _____ day of _____, 20_____, before me personally appeared _____, whose identity was proven to me on the basis of satisfactory to be the person who he or she claims to be and acknowledged that she signed the above document.

Notary Public: _____

{Stamp/ Seal Here}

Print Name: _____

My Commission Expires: _____



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ACKNOWLEDGEMENT OF UNDERSTANDING

As an applicant, employee or volunteer, I, _____ hereby understand that in accordance with Navajo Nation Personnel Policies Manual, Section IV.K.8.g., I am required to notify my supervisor in writing WITHIN 72 HOURS (3 days) of any arrest, criminal indictment or conviction.

My failure to report any arrest, criminal indictment, or conviction may result in disciplinary action pursuant to the Table of Penalties #24 and the Department of Personnel Management will be notified.

I further understand that my immediate supervisor upon my written notice is required to notify the Office of Background Investigations WITHIN 72 HOURS (3 days). In addition, I may be subjected to a new background check and a suitability assessment, which could materially affect the decision to hire me or to continue my employment with the Navajo Nation. Upon initiating the new background check all supporting documentation shall be submitted to the Office of Background Investigations. I understand I shall be subjected to applicable background check fee(s).

All documentation shall be treated in accordance with the Navajo Nation Privacy and Access to Information Act.

This form shall become immediately effective upon my completion of a favorable background check.

I hereby certify that I have read the foregoing statement and understand the content, and authorize the release of such records and information about myself.

SIGNATURE: _____ DATE: ____/____/____

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. ¹ 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), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not 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

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

² <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) and 906.2(d).