

Authorization to Transfer FBI Rapback Subscription for Schools

**Parent School –**

Applicant Name (as appears in ABC)

\_\_\_\_\_

Applicant TCN and Subscription Date (verified subscription)

\_\_\_\_\_

Transfer School(s) - (which school(s)) will the fingerprints be transferred to with the Agency Code (B Code):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I will allow (5) business days for transfer to take place before cancelling Rap Back Subscription.** As the original subscriber of this applicant’s fingerprints to both the WIN network and the NGI system, I understand that in the case of an audit by either the Utah Bureau of Criminal Identification or by the FBI, I will indicate that this applicant’s criminal history was disseminated to another school and the applicant’s subscription was transferred. I understand that the fingerprint subscription may be cancelled under the risk mitigation strategy required by the Utah Bureau of Criminal Identification from the parent school without impacting any of the other schools to which the fingerprints are transferred. I agree to keep a copy of this document with the signed privacy statement and privacy act, as well as the original waiver authorizing the parent school to send fingerprints to the Utah Bureau of Criminal Identification and the FBI for the purpose of screening the applicant for any criminal history, for the duration of employment/volunteerism plus three years after separation. After signing this document, a copy shall be given to the applicant to provide to the transfer school(s).

Authorized Signature \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Authorization to Transfer FBI Rapback Subscription

**Transfer School –**

I, \_\_\_\_\_ (Name of School Official) hereby authorize the transfer of \_\_\_\_\_'s (Name of Applicant) fingerprint subscription through the Western Identification Network (WIN) Network and the FBI Next Generation Identification (NGI) system as well as any existing criminal history information to \_\_\_\_\_ (Name of School and Agency Code). I understand that the applicant must sign a waiver as described by Utah Code Ann. § 53-10-108(4)(a), which is required to also contains the FBI Privacy Act Statement and FBI Noncriminal Justice Applicants Privacy Rights. I understand that the transfer authorization and waiver shall be kept on file for the duration of the employment/volunteerism of the applicant plus three years following the separation of the employee/volunteer. I also understand a fee of \$10 will be assessed to the transferee school for the transfer of this applicant's subscription and that the transferee school is responsible for payment to the Utah Bureau of Criminal Identification for this fee. I understand the penalties regarding the unlawful dissemination of criminal history information as described by Utah Code Ann. § 53-10-108 and any provisions under Pub. L. 92-544 and FBI policy. If audited by the Utah Bureau of Criminal Identification or the FBI, I understand that the transferee school is authorized by Utah Code Ann. § 53G-11-402 and agree to follow the guidelines described under this statutory authorization.

Authorized Signature \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

*A copy of this document (page 1 and 2) will be sent to the Utah Bureau of Criminal Identification who will transfer the applicant's criminal history information and subscription. Please allow 2 days before canceling rap back subscription in the event of a transfer.*

*Utah BCI phone 801-965-4445 option 6 or fax 801-969-7072*

*Email dpsabc@utah.gov*