

**Instructions for Obtaining Security Check for Field Placements**  
**College of Education**  
**Austin Peay State University**

You must complete a security clearance, which includes a background check and fingerprinting in order to enter public schools for field placements. There are no exceptions. Follow the steps listed below:

1. Register online at [www.identogo.com](http://www.identogo.com) or call 855-226-2937.
2. Look for the blue rectangle at the top right displaying “Get Fingerprinted.”
3. Select the state you need to be fingerprinted for by choosing **Tennessee** from the drop down menu. Click “go.”
4. Read the notice that states all payments are to be made by credit card onsite at the time of fingerprinting.
5. Scroll down and select “Digital Fingerprinting.”
6. Scroll down and look for the option on the left, “Schedule a New Appointment.” Select it.
7. Select “Don’t know your service code.”
8. For agency name, select **Non-DCS Child Care/Adoption Providers**. Click Go.
9. For applicant type, select **Child-Related Worker Volunteer (Private)**. Click Go.
10. For ori number enter **TNCC63013**. Click Go.
11. You have selected Austin Peay State University. Click **YES**.
12. You must check the I AGREE box to the acknowledgement/release. Click Go.
13. Enter the ZIP code for Austin Peay, **37044**, if you want a location close to campus. If you want a location closer to where you live or work, enter that zip code instead. Click Go.
14. For “Appointment Details,” select a location and time convenient for you. When scheduling your appointment day and time, remember **you will have to pay** when you go to get fingerprinted. If you are able to pay with a credit card, you can schedule your appointment anytime (as soon as possible). If you are paying with a money order or cashier’s check, be sure you allow enough time to purchase a money order or cashier’s check and still arrive at your appointment 15 minutes early. You will not be able to schedule same-day appointments at the Clarksville locations. If you need to reschedule your appointment, you must call IdentoGO to reschedule, not the facility you are scheduled at.
15. Press Continue.
16. For “Applicant Information,” fill out the required fields. Items marked with an **\*** are required. Under the “Applicant Home Address” heading the required field “Number” is your house number. For example, if you lived at 601 College Street, in the “Number” field you would type 601 and in the “Street Name” field you would type College Street. The field for “Applicant Employer Information” is not required so you can leave this field blank.
17. Information Verification: check for accuracy and edit any incorrect information.
18. The next screen tells you the cost (currently \$33.15 but subject to change). You can pay by credit card, money order (payable to IDEMIA) or a cashier’s check (payable to IDEMIA) onsite on the day of the appointment.
19. Additional Information: Arrive 15 minutes before your scheduled time. If you are more than 10 minutes late your appointment can be canceled or delayed (call the fingerprint location if you are going to be late). You need your registration ID number (print your “Registration Completed” page), a valid form of identification, and acceptable form of payment.
20. If you have any problems registering contact April Holland at (931) 221-6554. Email a copy of signed VECHS Wavier Agreement and Statement to April Holland [hollanda@apsu.edu](mailto:hollanda@apsu.edu) .



## VECHS WAIVER AGREEMENT AND STATEMENT

### Volunteer & Employee Criminal History System

for Criminal History Record Checks

under the National Child Protection Act of 1993, as amended

Pursuant to the National Child Protection Act of 1993, as amended, this form must be completed and signed by every current or prospective employee, volunteer and contractor/vendor, for whom criminal history records are requested by a qualified entity under these laws.

I hereby authorize (enter Name of Qualified Entity) Austin Peay State University to submit a set of fingerprints through the TBI vendor and this form to the Tennessee Bureau of Investigation (TBI), for the purpose of accessing and reviewing Tennessee and national criminal history that may pertain to me directly from the FBI, pursuant to 28 CFR, Sections 16.30-16.34. By signing this Waiver Agreement, it is my intent to authorize the dissemination of any national criminal history record that may pertain to me to the Qualified Entity with which I am or am seeking to be employed or to serve as a volunteer, pursuant to the National Child Protection Act of 1993, as amended.

I understand that, until the criminal history background check is completed, you may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities. I further understand that, upon request, you will provide me with a copy of the criminal history background report, if any, you receive on me and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before you make a final decision about my status as an employee, volunteer, contractor, or subcontractor.

**A national criminal history background check on me is being requested by the following:**

**Name of Qualified Entity:** Austin Peay State University

**Address:** PO Box 4428

**City:** Clarksville

**State:** TN

**Zip:** 37044

I  have OR  have not been convicted of a crime.

If convicted, describe the crime(s) and the particulars of the conviction(s) in the space below:

I am a current or prospective (check one):

Employee  Volunteer  Contractor/Vendor

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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**TO BE COMPLETED BY QUALIFIED ENTITY:**

Entity Name: Austin Peay State University

Address: PO Box 4428

City: Clarksville State: TN Zip: 37044

Telephone: (931) 221-7511 Fax Number: (931) 221-6306

**ORIGINAL MUST BE RETAINED BY QUALIFIED ENTITY**

**COPY MUST BE SUBMITTED TO TBI**