



**OSCEOLA TECHNICAL COLLEGE – KISSIMMEE CAMPUS**  
**Criminal Justice Academy of Osceola**

501 Simpson Road • Kissimmee, FL 34744 • (407) 518-5445 • Fax (407) 962-5265

## **NEW APPLICANT INSTRUCTION GUIDE/FORMS**

### **Medical Examination Form/Physician's Assessment CJSTC-75 Form**

You may go to your own physician to complete the physical, EKG, TB Tine Test, and CJSTC-75 Form. The **Medical Examination Form** is two-sided. Make sure the physician signs off on **both** sides of the form, **attaches your EKG tracing**, and seals it in a secured envelope. The CJSTC-75 Form must be completed by the physician at the same time. Physicals can be hand carried back to the Academy office, returned by mail, or sent electronically from the doctor's office to [tria.panchoo@osceolaschools.net](mailto:tria.panchoo@osceolaschools.net) cc: [guy.samuelson@osceolaschools.net](mailto:guy.samuelson@osceolaschools.net).

### **Physical Fitness Test**

A completed physical, EKG, and CJSTC-75 Form must be on file with the Academy office prior to taking the Physical Fitness Test. A \$15 fee must be paid at OTECH Bookstore prior to testing.

To make an appointment, please contact Coordinator Jose Feliciano at 321-624-5858 to set a test date and time. If you are unable to test due to illness or emergency, you **must call** the Coordinator at 321-624-5858 to reschedule.

Applicants should allow up to 1.5 hours for the completion of this test. Wear comfortable exercise clothing and running shoes (shorts are acceptable) and bring water to drink. Be fully rested on test day and don't eat anything 2-3 hours prior to testing. Always stretch out adequately before attempting this test.

### **Drug Screening**

Applicants must go to ARCpoint Labs to complete a **10-Panel UA** drug screening, walk-ins accepted. The fee is \$60. Results are sent to Academy staff: [tria.panchoo@osceolaschools.net](mailto:tria.panchoo@osceolaschools.net) cc: [guy.samuelson@osceolaschools.net](mailto:guy.samuelson@osceolaschools.net)

### **Fingerprinting – CARD will need to be pick-up at the Academy.**

All applicants must fingerprint at the Osceola County Sheriff's Office. Call **407/348-1166** to schedule an appointment. Tell staff that you are a recruit candidate for the Law Enforcement Academy class.

Present the blank APPLICANT fingerprint card and valid photo ID to the fingerprint technician. **DO NOT complete the top portion of the card.**

After fingerprinting, visit the following web address to make a credit card payment of \$37.25 for your criminal history check to be completed by the state and the Federal Bureau of Investigation: <https://caps.fdle.state.fl.us>

Bring your completed fingerprint card to the Academy office for validation.

### **Final Review**

A final validity review will be conducted when all test results have been received and approved. At that time, applicants will be notified of an appointment date/time to meet with the Academy Director. Professional dress is required on this date.

### **Helpful Contacts**

**ARCpoint Labs of Altamonte**  
774 N. Lake Blvd – Suite 1008  
Altamonte, FL 32701  
Phone: 407-951-7575

**Osceola County Sheriff's Office/Records-Fingerprint Services**  
2601 E. Irlo Bronson Memorial Highway  
Kissimmee, FL 34744  
407/348-1157

Revised 4/11/2024

# MINIMUM PHYSICAL FITNESS STANDARDS

Each Florida Law Enforcement Academy applicant must meet the fitness standards listed below.

**Push-ups:** Complete at least 20 push-ups in one minute

**Sit-ups:** Complete at least 25 sit-ups in one minute

**1.5 Mile Run:** Complete a 1.5 mile run in 16 minutes or less

**300 Meter Run:** Complete a 300-meter run in 75 seconds or less

# MEDICAL EXAMINATION FORM

Florida Criminal Justice Standards and Training Commission  
Minimum Guidelines for Physical Examination

## Criminal Justice Academy of Osceola

Osceola Technical College-Kissimmee Campus  
501 Simpson Road • Kissimmee, FL 34744  
(407) 518-5445 • FAX (407) 962-5265

### TO BE COMPLETED BY APPLICANT

**Note:** All sections of this form must be completed and EKG tracing attached, or you will not continue in the Academy's Application process.

Print Applicant's Name \_\_\_\_\_  
Last First MI

Applicant's Address \_\_\_\_\_  
Street, Apt., or P.O. Box Number City State Zip

Last Four Digits of Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_

### TO BE COMPLETED BY EXAMINING PHYSICIAN

The above applicant is seeking entry into a law enforcement or correctional basic recruit training program. A complete physical examination at a level of specificity sufficient to determine whether there are any medical or physiological restrictions that would prevent the applicant from performing the training activities stated on the reverse side of this form. While conducting this medical screening, please point out any physical abnormalities, deficiencies, or apparent emotional instability that may impair the applicant's ability to perform any of the basic recruit training program activities. Please check normal or abnormal after each entry and make additional comments as necessary. **Note that an EKG examination is required and must be attached to this form upon completion of your medical evaluation.**

1. Note the presence of the following:  
 Eyeglasses    Contact lenses    Hearing aids   or devices such as:    Braces    Supports    Canes    Crutches    Protheses  
 Comments \_\_\_\_\_
2. Gender:  Male    Female      3. Height: \_\_\_\_\_ ft. \_\_\_\_\_ inches      4. Weight: \_\_\_\_\_ lbs.
5. Frame:  Light    Medium    Heavy      6. Oral Temperature: \_\_\_\_\_      7. Blood Pressure: \_\_\_\_\_ over \_\_\_\_\_
8. Resting Pulse: \_\_\_\_\_ Please note any irregularity \_\_\_\_\_      9. Resting Respiratory Rate: \_\_\_\_\_
10. Urinalysis: \_\_\_\_\_ Sugar      \_\_\_\_\_ Albumin      11. Vision: \* Right 20/ \_\_\_\_\_ Left 20/ \_\_\_\_\_

*\*Vision must be correctable to 20/40.*

Physical Examination Areas	Normal	Abnormal	Comments
Color Perception			
Estimated Field of Vision			
Estimated Auditory Acuity			
Head, Eyes, Ears, Nose, Sinuses, Throat, Neck, & Thyroid Gland			
Thorax and Lungs			
Heart			
Abdomen			
Extremities			
Skin			
Spine			
Mental Status			
Electrocardiogram			

Once completed by a licensed Physician, this Medical Examination Form must be placed in a sealed envelope and mailed or delivered to the Criminal Justice Academy of Osceola at 501 Simpson Road, Kissimmee, FL 34744



## Instructions to the Examining Physician:

Basic Recruit Training Program activities involve the use of weapons, the mastery of defensive tactics, and hand-to-hand combat techniques. Student participation also requires chemical agent contamination per mandated curriculum developed by the Criminal Justice Standards and Training Commission, Florida Department of Law Enforcement.

Law Enforcement officers are required to engage in pursuit on foot and by vehicle and be physically capable of lifting and carrying disabled persons. The performance of these tasks can involve maximal physical exertion, sometimes for extended periods. Through an analysis of essential job duties, and in recognition of physical attributes necessary to perform these functions, experts have determined that the cardiovascular, pulmonary, musculoskeletal, nervous, and blood systems, along with the special senses of vision, hearing, and smell are required for the successful performance of all law enforcement job functions.

## FINAL OPINION:

**Based on your medical judgment, please indicate this applicant's suitability at this time by checking one of the statements below.**

- No disqualifying or exclusionary disorders are present, and no further medical evaluation is recommended.
- Reasonable accommodation is necessary. Explain \_\_\_\_\_  
\_\_\_\_\_
- Further medical evaluation is recommended. Explain \_\_\_\_\_  
\_\_\_\_\_
- An exclusionary disorder exists, and the applicant is disqualified. Explain \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician, Certified Advanced Registered Nurse  
Practitioner, or Physician Assistant's Signature

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

\_\_\_\_\_  
Examination Date

\_\_\_\_\_  
Physician, Certified Advanced Registered Nurse Practitioner, or Physician Assistant's License Number

\_\_\_\_\_  
Licensing State

\_\_\_\_\_  
Physician, Certified Advanced Registered Nurse Practitioner, or Physician Assistant's Professional Address

\_\_\_\_\_  
Contact Phone Number



Florida Department of Law Enforcement

PHYSICIAN'S ASSESSMENT

Incorporated by Reference in Rules 11B-27.002(1)(d) and 11B-35.001(11)(c)14., F.A.C.



CJSTC 75

- 1. Applicant's Name: Last First MI
2. Last Four Digits of the Applicant's Social Security Number:
3. Hiring Agency: N/A
4. Training School: Criminal Justice Academy of Osceola

- 5. The Applicant Is Requesting Employment and/or Admission Into a Basic Recruit Training Program in One of the Following Disciplines:
Law Enforcement [X] Correctional [ ] Correctional Probation [ ]

Note: For employment, a position description that describes the job duties the applicant will perform must be provided. For training, the physical fitness conditioning program developed by the training center must be provided.

- 6. Student Participation in Basic Recruit Training Program. A student enrolled in a basic recruit training program (B RTP) is required to participate in the following activities:
A. Defensive tactics and firearms high-liability training is a component of the curriculum mandated by the Criminal Justice Standards and Training Commission. Firearms training requires firing a handgun and long gun creating exposure to lead. Defensive tactics training requires sustained physical exertion and chemical agent contamination to the chemicals oleo-resin capsicum (OC) and/or orthochlorobenzalmalononitrile (CS).
B. Physical Fitness Conditioning and Physical Fitness Testing: A B RTP student shall participate in physical fitness conditioning and a fitness test and includes the following measures:
- Vertical Jump - One Minute Sit Ups - 300 Meter Run - Maximum Push Ups - 1.5 Mile Run/Walk
C. The training center director has attached the training school's physical fitness conditioning program: Yes [X] No [ ]

\*\*\*\*\*TO BE COMPLETED BY THE STUDENT\*\*\*\*\*

- 7. Medical Conditions Regarding OC/CS Contamination. A B RTP student should be aware of the following personal considerations that may restrict participation in the chemical agent contamination of the B RTP and could possibly be aggravated to a severe degree during the contamination: Recent eye surgery, heart problems, panic disorder or stress, respiratory disorder, emphysema (loss of elasticity/thinning of lung tissues), bronchial asthma, x-ray evidence of pneumoconiosis (black lung), evidence of reduced pulmonary (lung) function, chronic obstructive pulmonary disease, coronary (heart) artery disease, cerebral (brain) blood vessel disease, severe or progressive hypertension (high blood pressure), epilepsy, generalized seizures, pernicious anemia (severe reduction in red blood cells), diabetes (any form), pneumomediastinum gap (air in the sac surrounding lungs), history of skin allergies, or any condition for which the student is presently taking medication.
8. B RTP Student Certification. I certify that I have reviewed the above information and I do [ ] or do not [ ] have any medical restrictions that would prevent me from participating in the basic recruit training program activities outlined in item numbers 6A and 6B above.

9. Student's Printed Name: Date

10. Student's Signature:

11. To the Examining Physician:
The examination of this applicant is for employment or training as an officer, and shall include a complete physical examination at a level of specificity sufficient to determine whether there is any medical or physiological reason that would prevent the applicant from performing the essential functions for employment or training as an officer for the discipline indicated in number 5 above. Disabilities, impairment, or limitations identified by the examination, which would prevent the applicant from performing the essential functions for the officer position, should be reported to the employing agency.

- 12. Physician's Attestation:
[ ] I hereby attest that I have examined the above named applicant and find him/her CAPABLE of participating in basic recruit training and/or performing the essential functions of the law enforcement, correctional, or correctional probation officer job for which the applicant is seeking employment and/or training reflected in number 3 and/or 4 above.
[ ] I hereby attest that I have examined the above named applicant and find him/her NOT CAPABLE of participating in basic recruit training and/or performing the essential functions of the law enforcement, correctional, or correctional probation officer job for which the applicant is seeking employment and/or training reflected in number 3 and/or 4 above

13. Pre-existing Conditions: Sections 112.18 and 943.13, F.S., require agency knowledge of the following three pre-existing conditions. However, these outcomes do not statutorily disqualify the applicant from employment. Please respond to the following "in my professional opinion, this examination":

- 13a. Did [ ] or did not [ ] reveal evidence of tuberculosis
13b. Did [ ] or did not [ ] reveal evidence of heart disease
13c. Did [ ] or did not [ ] reveal evidence of hypertension

14. Physician, Certified Advanced Registered Nurse Practitioner, or Physician Assistant's Signature Printed Name Examination Date

15. Physician, Certified Advanced Registered Nurse Practitioner, or Physician Assistant's License Number Licensing State

16. Physician, Certified Advanced Registered Nurse Practitioner, or Physician Assistant's Professional Address

## INSTRUCTIONS FOR COMPLETING FORM CJSTC-75

Use this form to document and verify the applicant's compliance with the employment requirements of Section 943.13, F.S., and Rule 11B-27.002(1)(d), F.A.C., and/or with the Basic Recruit Training Program entrance requirements of Rule 11B-35.001(14)(b), F.A.C.

### GENERAL INSTRUCTIONS

- The physical examination must be performed by a physician licensed under Chapters 458 or 459, F.S., a certified advanced registered nurse practitioner, or a physician assistant.
- This form or an equivalent form, indicating that the officer is capable of performing the essential functions of the law enforcement, correctional, or correctional probation officer duties for which the applicant is seeking employment, **is required** for each new employment or appointment of an officer and may shall be used in conjunction with the Patient Information form CJSTC-75A or an equivalent form, to assist the physician, certified advanced registered nurse practitioner, or physician assistant, by providing testing guidelines to examine the applicant. The physical examination shall not be completed more than one year prior to the officer's date of employment or appointment and a CJSTC-75 form completed for one employing agency may not be used by any other employing agency. If the examination is for employment only, sections 6 – 10 are not required.
- This form, indicating that an applicant is capable of participating in a Basic Recruit Training Program (B RTP), is **required if the applicant is entering a B RTP** and must be completed prior to entrance into a B RTP. The completed form must be maintained in the B RTP course file.
- If an applicant is entering a Basic Recruit Training Program and gaining employment with a criminal justice agency at the same time, a single CJSTC-75 form may be completed for the employing agency and for the training center. The original CJSTC-75 form should reside at the employing agency with a copy being provided to the training center.

### INSTRUCTIONS ON HOW TO COMPLETE THIS FORM

1. **Applicant's Name:** Enter the applicant's full legal name.
2. **Last Four Digits of the Social Security Number:** Enter the last four digits of the applicant's social security number.
3. **Hiring Agency:** Enter the hiring agency's name (if applicable).
4. **Training Center:** Enter the training center's name (if applicable).
5. **Request for Employment and/or Training as an officer:** Place a check mark in the box for the discipline in which the applicant is being employed or completing training.
6. **Student Participation in Basic Recruit Training Program Activities. Defensive Tactics (includes chemical agent contamination), Firearms, and Physical Fitness Conditioning and Physical Fitness Testing:** High-liability training in defensive tactics, firearms, and chemical agent contamination is a component of the curriculum mandated by the Criminal Justice Standards and Training Commission and participation in the activities is a requirement for successfully completing a B RTP. **There is no pass or fail at this time.** The test results for each of the five required tests will be recorded on the Academy Physical Fitness Standards Report, form CJSTC-67A as "I" if the student did not perform the test component or "D" if the student was dismissed from the basic recruit training program.
  - A. **Defensive Tactics and Firearms Training.** Firearms training requires firing a handgun and long gun creating exposure to lead. Defensive tactics training requires sustained physical exertion and chemical agent contamination to the chemicals oleo-resin capsicum (OC) and/or orthochlorobenzalmalononitrile (CS).
  - B. **Physical Fitness Conditioning and Physical Fitness Testing.** The Physical Fitness Test includes the following measures and are defined as follows:
    - **Vertical Jump.** This measures leg power by measuring how high a person jumps.
    - **One Minute Sit Ups.** This measures abdominal, or trunk, muscular endurance. While lying on his or her back, the student will be given one minute to do as many bent-leg sit ups as possible.
    - **300 Meter Run.** This measures anaerobic power, or the ability to make an intense burst of effort for a short time period or distance. This component consists of sprinting 300 meters as fast as possible.
    - **Maximum Push Ups.** This measures the muscular endurance of the upper body. This component consists of doing as many push-ups as possible until muscular failure. Males are required to perform the standard push-up and females have the option to perform the standard or modified push-up.
    - **1.5 Mile Run/Walk.** This measures aerobic power or cardiovascular endurance (stamina over time). To complete this component, the student runs or walks a distance of 1.5 miles as fast as possible.
  - C. A physical fitness conditioning program developed by the training school shall be attached to form CJSTC-75 prior to the student's examination by a physician, certified advanced registered nurse practitioner, or the physician assistant.
7. **Medical Conditions Regarding Chemical Agent Contamination.** The student shall review the listed medical conditions and list other conditions that may restrict him or her from participating in Chemical Agent Contamination to the chemicals oleo-resin capsicum (OC) and/or orthochlorobenzalmalononitrile (CS).
8. **Basic Recruit Training Program Activities Certification.** The student shall check the appropriate box to indicate if he or she does or does not have a medical condition that would restrict participation in the B RTP activities indicated in item numbers 6A and 6B of this form.

9. **Student's Printed Name.** The student shall print his or her first name, last name, and middle initial.
10. **Student's Signature and Date.** The student shall provide a signature and date to verify the information provided by the student is true and correct.
11. **Examining Physician:** The examining physician shall examine the applicant for any medical or physiological reasons that would prevent the applicant from entry into a B RTP or as an officer for employment purposes, pursuant to the attached job duties and/or physical conditioning program.
12. **Physician's Attestation:** The physician, certified advanced registered nurse practitioner, or physician assistant shall mark the appropriate box attesting that the applicant is capable or not capable of participating in basic recruit training and/or performing the essential functions of the law enforcement, correctional, or correctional probation officer discipline for which the officer/applicant is seeking training and/or employment.
13. **Pre-existing Conditions:** The physician, certified advanced registered nurse practitioner, or physician assistant shall mark the appropriate box for each pre-existing condition attesting that the examination of the applicant **Did or Did Not** reveal evidence of the pre-existing conditions listed. These outcomes are not disqualifying for employment.
14. **Signature:** The physician, certified advanced registered nurse, or physician assistant shall sign and print his or her name and enter the examination date.
15. **License Number:** Enter the physician, certified advanced registered nurse practitioner, or physician assistant's license number and licensing state.
16. **Professional Address:** Enter the physician, certified advanced registered nurse, or physician assistant's professional address.





# Criminal Justice Academy of Osceola

Each law enforcement recruit must meet the fitness standards listed below.

<b>Push-ups:</b>	Complete at least 20 push-ups in one minute
<b>Sit-ups:</b>	Complete at least 25 sit-ups in one minute
<b>1.5 mile run:</b>	Complete a 1.5 mile run in 16 minutes or less
<b>300 Meter Run:</b>	Complete a 300 meter run in 75 seconds or less

## Preparation Instructions:

To prepare for the 1.5 mile run a recruit should utilize an interval-training program. This program can be accomplished in any safe location by utilizing time intervals.

1. Begin by warming-up the leg muscles and the heart with 5-10 minutes of walking followed by light stretching of the leg muscles.
2. Utilizing a stop watch or watch, walk at a brisk pace for one minute; jog for one minute; and run for one minute. Repeat this cycle of walking, jogging and running six times or for a total of 18 minutes.
3. Finish by cooling down the leg muscles and the heart with 5-10 minutes of walking followed by light stretching of the leg muscles.
4. As you begin this workout routine you should set a personal goal to reduce the walking time and increase the jogging and run times.
5. Continue this workout until you are able to run the entire 18 minutes.

To prepare for the push-up and sit-up test which are intended to measure the dynamic strength or endurance to the recruit's upper body.

### a. The Push-up

1. Begin by warming-up the heart with 5-10 minutes of walking followed by light stretching of the upper body muscles.
2. Assume the push-up position – body straight, elbows extended (not locked), hands slightly further than shoulder width apart – and perform one push-up by lowering the body to approximately three inches from the ground and then returning the body to the elevated position without locking the elbows. (Breathe out during exertion.)
3. Repeat the above procedure and perform sets of two, three, four, and five push-ups. After completing the sets of five push-ups, rest until feeling sufficiently comfortable to resume.
4. Following a rest period, perform the sets of five, four, three, two, and one push-ups.
5. Finish by cooling-down the heart with 5-10 minutes of walking followed by light stretching of the upper body muscles.

### **b. The Sit-up**

Sit-up exercises should be performed in conjunction with push-up exercises. With this in mind, the warm-up and cool-down phases will be accomplished in accordance with the format outlined above.

1. Assume the sit-up position – lying back down, knees slightly bent, feet flat on the floor (anchored either by a partner or by another device), hands placed beside the ears or across the chest (**avoid placing pressure on the neck**) – and perform one sit-up by raising the upper body to a vertical position then lowering the body to a position with the shoulder blades touching the ground. (Breath out during exertion.)
2. Repeat the above procedure and perform sets of two, three, four, and five sit-ups. After completing the set of five sit-ups, rest until feeling sufficiently comfortable to resume.
3. Following a rest period, perform sets of five, four, three, two, and one sit-ups.

**To prepare for the 300 Meter Run** a recruit should utilize an interval-training program. This program can be accomplished in any safe location by utilizing time intervals.

1. Measure a 300 meter (984.2 feet) running course.
2. Warm up leg muscles and heart with a 5 minute jog, followed by 20 walk lunges followed by light stretching of the leg muscles.
3. At a moderate pace (faster than a jog, slower than a full sprint) complete the course 2 times then walk it once.
4. Complete 4 to 5 300 meter sprints,  $\frac{3}{4}$  speed the first two, then full speed after that.
5. Finish by cooling down the leg muscles and the heart with 3-5 minutes of walking followed by light stretching of the leg muscles.

### **Other Recommendations and Reminders:**

1. Do not begin a physical fitness or exercise program without first consulting with and receiving clearance from a physician.
2. The intensity and duration of exercise may be increased as the body adapts. In other words, as the ability to perform push-ups increases, the number of push-ups being performed should also increase.
3. Exercise three days a week and leave a day between each exercise session for the body to rest. In other words, exercise every other day (i.e. Monday, Wednesday and Friday). If however, participation in both cardio-vascular and a strength-training program is either necessary or desired, exercise events can be alternated throughout the week (i.e. Cardio-vascular training on Monday, Wednesday and Friday; Strength training on Tuesday, Thursday, and Saturday).
4. Use common sense to prevent unnecessary injury. If, for example, unusual soreness or pain results from exercise, rest until the soreness and/or the pain subsides.
5. A prudent diet should also be followed.
6. Keep yourself hydrated during exercise sessions.

## NOTICE FOR APPLICANTS SUBMITTING FINGERPRINTS FOR A CRIMINAL HISTORY RECORD CHECK

### NOTICE OF:

- **RETENTION OF FINGERPRINTS,**
- **PRIVACY POLICY, AND**
- **RIGHT TO CHALLENGE AN INCORRECT CRIMINAL HISTORY RECORD**

This notice is to inform you when you submit a set of fingerprints to the Florida Department of Law Enforcement (FDLE) for the purpose of conducting a search for any Florida and national criminal history records that may pertain to you, the results of the search are returned to the authorized agency ORI indicated in the transaction. By submitting fingerprints, you are authorizing the dissemination of any state and national criminal history record that may pertain to you to the agency from which you are seeking approval to be employed, licensed, or have access to their facility. The fingerprints submitted are retained by FDLE and the Federal Bureau of Investigation (FBI), and FDLE will notify the agency of any subsequent arrests.

Your Social Security Account Number (SSAN) is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 U.S.C. § 552a), FDLE is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. FDLE does not require a SSAN but it could cause a delay in processing your criminal history record check.

Authorized agencies are allowed to release a copy of the state and national criminal record information to a person who requests a copy of his or her own record if the identification of the record was based on submission of the person's fingerprints. Therefore, if you wish to review your record, you may request a copy of your record from the screening agency. After you have reviewed the criminal history record, if you believe it is incomplete or inaccurate, you may conduct a personal review as provided in s. 943.056, F.S., and Rule 11C-8.001, F.A.C. by calling FDLE at (850) 410-7898. If you believe the national information is in error, you may contact the FBI at (304) 625-2000. You can receive any national criminal history record that may pertain to you directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34. You have the right to obtain a determination as to the validity of your challenge before a final decision is made about your status as an employee, volunteer, contractor, or subcontractor within a reasonable time.

The FBI's Privacy Statement follows on a separate page and contains additional information.

## PRIVACY ACT STATEMENT

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal rules providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Social Security Account Number (SSAN).** Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based record checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

**Additional Information:** The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch that has also published notice in the Federal Register describing any systems(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).