

# Criminal History Record Request Form

You can either mail your request or come in person to:

Nebraska State Patrol  
 Criminal Identification Division  
 3800 NW 12th Street – Suite A  
 Lincoln, NE 68521

**Requests can also be made online at  
 ne.gov/go/cbg  
 for an additional fee of \$3**

This form is used to request a Record of Arrest and Prosecution (RAP) sheet for person of interest listed below. The RAP sheet includes only Nebraska fingerprint based arrests and resulting dispositions. There is a \$12.50 fee for this service. This fee is accepted as cash, check or money order. Make checks payable to Nebraska State Patrol. Certification/Notarization of record by the Nebraska State Patrol must be specifically requested.

Date:			
This request is on: (check one) <input type="checkbox"/> Yourself <input type="checkbox"/> Someone Else			
Reason for request:			
<b>Person of Interest</b> (person on whom background check will be completed)			
First Name:	Middle name:	Last name:	
ALIAS / AKA: List any other names used: maiden, married, adopted, nicknames, short names, etc.			
SSN:        -        -	<i>This request will not be denied for refusal to provide a social security number, but the criminal history check <u>may take longer without the number</u>, which will be used only for the purpose of confirming identity during the criminal history check.</i>		
DOB (xx/xx/xxxx):	Sex:	Race:	
Current Address:			
City, State, Zip:			
Phone #:		Fax #:	
<b>Results will be faxed to the number provided unless a self-addressed stamped envelope is enclosed.</b>			
<b>Individual Or Agency Requesting the Background Check</b> (Only if different than above)			
Agency:			
Individual Requesting:			
Mailing Address:			
City, State, Zip:			
Phone #:		Fax #:	

\_\_\_\_\_  
*Signature of Requester (Individual or Agency)*

If mailing a request for a criminal history on yourself or someone else and you would like a full release of criminal history, you will need to have this request form signed by the person of interest and notarized. If this form is not notarized, a public record will be released to you. See §29-3523 for the difference between public record and full release criminal history records.

I consent to the disclosure and copying of any Record of Arrest of Prosecution to the above listed persons.

State of \_\_\_\_\_)

County of \_\_\_\_\_)

)ss

\_\_\_\_\_  
*Signature of Person of Interest*

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
 Notary Public