



# WV DHHR BCF Background Check Guide

# Statement of Criminal Record

Electronic Fingerprints

\*Date of Appointment \_\_\_\_\_

Hard Card Fingerprints

Facts ID# \_\_\_\_\_

Facility/Provider: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Licensing Specialist: \_\_\_\_\_

Name (print full name): \_\_\_\_\_

Maiden name and Aliases: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## Authorization

I authorize the West Virginia Department of Health and Human Resources and/or the above named facility to conduct a criminal background check as a condition of my providing care for children and/or adults. I understand that criminal records in this state or any other state may be checked as well as records with the Federal Bureau of Investigation. I authorize the contents of the criminal background record to be shared between the facility named at the top of this form and the Department.

## Declaration

I have/ have not (*circle one*) been convicted of any crime, pled guilty, or pled nolo contendere to any crime.

List crimes for which convicted:  
(Attach additional sheet if needed) \_\_\_\_\_

I have/ have not (*circle one*) lived out of state after the age of 18.

List city and states where you have  
previously lived:  
(Attach additional sheet if needed) \_\_\_\_\_

I am/am not (*circle one*) currently on probation or parole.

I am/am not (*circle one*) currently charged or indicted with any crime.

I will report any arrests to the facility named above or to the Department within 24 hours of the arrest.

I agree to cooperate with the Department in conducting a criminal history record check.

## Understanding

I understand that pending charges or conviction of a felony offense or pending charges or conviction of more than one misdemeanor offense may result in denial of being a provider for the care of children or adults, or in the denial of employment with the above named facility.

Failure to disclose convictions, charges or indictments may result in denial of being a provider for the care of children or adults, or in the denial of employment with the above named facility.

## Notice

All child and adult service providers in the state of West Virginia are subject to provisions of law creating a central abuse registry. Any person providing services for compensation to children or incapacitated adults, who is convicted of a misdemeanor or felony offense constituting abuse, neglect or misappropriation of property of a child or an incapacitated adult, is subject to listing on the central abuse registry. Listing on the registry may limit future employment opportunities. The facility/provider listed above is mandated to report all suspected instances of abuse, neglect or misappropriation of property to the proper authorities and will cooperate in the prosecution of these offenses.

\_\_\_\_\_  
Signature / Date

\_\_\_\_\_  
Witness (Facility Director or WV DHHR staff / Date

**Contents**

Contacting Customer Service..... 3

Instructions for Electronic (Livescan) Fingerprinting Process..... 4

Background Check Type Descriptions..... 6

Remittance Instructions..... 7

Facility Number..... 8

Applicant Fingerprint Registration Instructions..... 9

### Contacting Customer Service

Questions concerning results, results not received, remittance, or any other general questions should be directed to:

WV DHHR BCF Background Unit at (304)356-4515.

Questions concerning the [www.IdentoGO.com](http://www.IdentoGO.com) website or scheduling should be directed to:

MorphoTrust Customer Service at (855)766-7746.

Questions concerning facility numbers or licensing requirements should be directed to:

The Licensing Specialist for your facility.

## Instructions for Electronic (Livescan) Fingerprinting Process

Overview and steps involved in fingerprint background check process are listed below.

### **Step # 1: Determine what type of background check is required**

Each applicant will need either a CIB (State) only or both a CIB and FBI (State and Federal) background check. For further details please see section regarding Background Type Descriptions on page 6.

### **Step # 2: Statement of Criminal Record (SOCR) and Remittance**

A Statement of Criminal Record **must** be submitted for each applicant who will be fingerprinted. If an FBI background check is also required for an applicant, remittance **must** be submitted with their SOCR. Both the SOCR and remittance (if required) must be submitted before results will be released. Send this information to The Background Unit at WV DHHR Bureau for Children and Families. For further details please see section regarding Remittance Instructions on page 7.

**Step # 3: Know your facility number.** All facilities must have their correct eight digit FACTS number (provider number) in order to make a fingerprinting appointment, and to ensure applicants' results go back to the correct facility. For further information see section regarding facility number on page 8.

**Step #4: Scheduling an appointment.** Appointments can be scheduled online at [www.IdentoGO.com](http://www.IdentoGO.com). For further scheduling instructions please see section beginning page 9.

**Step #5: Getting Fingerprinted.** Each applicant must go to the designated location where they were scheduled to be fingerprinted. Applicants must have government issued identification, such as a driver's license, at the time of being fingerprinted. It is recommended that all applicants take a copy of their appointment verification. Facilities should write on the appointment verification their facility number and what type of background check the applicant is being fingerprinted for. This will help prevent any confusion between the live scan operator and the applicant.

**Step #6: Receiving Results.** Anticipated time for receiving results for applicants should be approximately two weeks of the applicant being fingerprinted. If the SOCR or remittance was required but not received, results will not be mailed out to the facility. Please allow at least four weeks before inquiring about any results that have not yet been received.

## Background Check Type Descriptions

Consider the following description/explanation for determining what types of background checks are required:

### **Residential Child Care Facility Applicants:**

***A WV State (CIB) background check is required*** for each applicant. If an applicant currently lives outside of West Virginia, they are required to have a CIB check from their State of residency, *in addition* to a CIB check in West Virginia. To receive a State (CIB) only background check, select the following on the website: “WV State (CIB) Background Check Only”

***A Federal Bureau of Investigation (NCIC) check is required*** if the applicant currently lives outside of West Virginia or has lived outside of West Virginia since turning 18 years of age. To receive a State (CIB) and a Federal (NCIC) background check, select the following on the website: “Both WV State (CIB) and Federal (FBI/NCIC)”

### **Child Care Centers:**

***A WV State (CIB) background check is required*** for each applicant. To receive a State (CIB) only background check, select the following on the website: “WV State (CIB) Background Check Only”

***A Federal Bureau of Investigation (NCIC) check is required*** for any applicant who has lived outside West Virginia within the past five years, or has established residence outside West Virginia for more than one year since turning eighteen years old. To receive a State (CIB) and a Federal (NCIC) background check, select the following on the website: “Both WV State (CIB) and Federal (FBI/NCIC)”

### **Background Checks for Foster and Adoption Applicants:**

**All foster and adoption applicants are required to have both** a CIB (State) and NCIC (FBI/Federal) background checks. To receive a State (CIB) and a Federal (NCIC) background check, select the following on the website: “Both WV State (CIB) and Federal (FBI/NCIC)”

## Remittance Instructions

See below for guidance on remittance instructions for each type of background check requested.

### **West Virginia State Background Checks (CIB) – State Only**

All applicants are **required** to submit a Statement of Criminal Record to:

*WV DHHR Bureau for Children and Families Background Unit  
350 Capitol Street  
Room 730  
Charleston, WV 25301-3711*

No form of payment is required from the applicant if only a WV State CIB background check is required.

### **West Virginia State (CIB) and Federal Background Checks (FBI/NCIC )**

All applicants are **required** to submit payment in the amount of **\$30.25** made out to WV DHHR BCE; along with their Statement of Criminal Record to:

*WV DHHR Bureau for Children and Families Background Unit  
350 Capitol Street  
Room 730  
Charleston, WV 25301-3711*

## Facility Number

A facility number is the agency's provider number, also known as the FACTS ID number. It is an eight digit number beginning with a three. The facility number is to be entered in the facility number box, to identify the provider agency. If you do not have the facility number, you must contact your WV DHHR BCF Licensing Specialist to obtain it prior to completing the application for a State (CIB) and/or Federal (FBI/NCIC) backgrounds check. This identifying number is how WV DHHR BCF identifies the correct facility to return results to.

\*If a potential facility has not yet received a FACTS ID number they will need to contact their Licensing Specialist to have one set up for them.

## Applicant Fingerprint Registration Instructions

### DHHR BCF Applicant Registration – Livescan locations

#### Registration Step 1, screen 1:

Applicant will select WV DHHR Bureau of Children and Families from main agency menu below:

West Virginia

Step 1: Your program

Select the type of background check as it appears on your application form. If you are unable to determine the type of background check, please call Murphy Trust USA at (800) 795-7746 for assistance.

Type of Background Check

Type of Criminal and Fingerprint

Cancel Continue

**Registration Step 1, screen 2:**

Applicant will then select correct option by choosing button to left of correct option for WV State & FBI background check or WV State Only background check:  
State and FBI Option: **Both WV State(CIB) and Federal (FBI/NCIC)**

West Virginia

Step 1  
Your program

Reason for Fingerprinting\*

Both WV State (CIB) and Federal (FBI/NCIC)  WV State (CIB) Background Check Only

Back Cancel Continue

State Only Option: **(WV State(CIB) Background Check Only)**

West Virginia

Step 1  
Your program

Reason for Fingerprinting\*

Both WV State (CIB) and Federal (FBI/NCIC)  WV State (CIB) Background Check Only

Back Cancel Continue

**Registration Step 1, screen 3:**

Applicant confirms selection:

State and FBI option selected: **DHHR Both State CIB and Federal FBI NCIC**

West Virginia

Step 1  
Your program

**Services**

Service Name

**DHHR Both State CIB and Federal FBI NCIC** Edit Delete

Add Service Cancel Continue

State Only option selected: **DHHR WV State CIB Background Check Only**

West Virginia

Step 1  
Your program

**Services**

Service Name

**DHHR WV State CIB Only** Edit Delete

Add Service Cancel Continue

**Registration Step 2, screen 1:**

Applicant then enters all required demographics and provides their facility number in entry box show below:

West Virginia

Step 1  
Young Adult
Step 2  
Your details

|  |   |   |   |
|--|---|---|---|
| <b>First Name</b><br><input type="text"/>  | <b>Last Name</b><br><input type="text"/>  | <b>Middle Name</b><br><input type="text"/>  | <b>Suffix</b><br><input type="text"/>       |
| <b>Alias First</b><br><input type="text"/> | <b>Alias Last</b><br><input type="text"/> | <b>Alias Middle</b><br><input type="text"/> | <b>Alias Suffix</b><br><input type="text"/> |

**Social Security**  
**Date of Birth**

+

---

|   |   |
|---|---|
| <b>Address Line 1</b><br><input type="text"/> | <b>Address Line 2</b><br><input type="text"/> |
| <b>City</b><br><input type="text"/>           | <b>Zip Code</b><br><input type="text"/>       |
| <b>Country</b><br><input type="text"/>        | <b>State</b><br><input type="text"/>          |
| <b>Home Phone</b><br><input type="text"/>     | <b>Work Phone</b><br><input type="text"/>     |
| <b>Cell Phone</b><br><input type="text"/>     |   |

**Stay Informed**

Providing your email address gives you access to real time updates with your enrollment and makes updates and status checks easier.

|  |   |
|--|---|
| <b>Email Address</b><br><input type="text"/> | <b>Re-Enter Email Address</b><br><input type="text"/> |
|--|---|

|  |  |  |                                       |
|--|--|--|---------------------------------------|
| <b>Date of Birth</b><br><input type="text"/> | <b>Gender</b><br><input type="text"/>    | <b>Height</b><br><input type="text"/>    | <b>Weight</b><br><input type="text"/> |
| <b>Hair Color</b><br><input type="text"/>    | <b>Eye Color</b><br><input type="text"/> | <b>R</b><br><input type="text"/>         | <b>Inch</b><br><input type="text"/>   |
| <b>Race</b><br><input type="text"/>          | <b>Ethnicity</b><br><input type="text"/> | <b>Skin Tone</b><br><input type="text"/> |                                       |

|  |  |  |
|--|--|--|
| <b>Birth City</b><br><input type="text"/>      | <b>Birth Country</b><br><input type="text"/>           | <b>Birth State</b><br><input type="text"/>                 |
| <b>Social Security</b><br><input type="text"/> | <b>Confirm Social Security</b><br><input type="text"/> |  |
| <b>Citizen Country</b><br><input type="text"/> | <b>Issuing State of ID</b><br><input type="text"/>     | <b>State or Drivers License ID</b><br><input type="text"/> |
|  |  | <b>Drivers License Type</b><br><input type="text"/>        |

**Facility Number**

Back
Save and Back
Cancel
Continue

Facility Number entry box:

**Facility Number\***

*Facility number is provided by employer/facility and entitles state with reduced state fee charged. This number must be entered here and will be included in submission to WVSP to verify reduced fee and to help identify facility/employer to DHHR.*

**Registration Step 3, screen 1:**

Applicant then selects location, date, and time of fingerprint appointment.  
(Screen will show best match based on applicant provided zip code, but other sites or criteria can be searched as well.)

West Virginia

Step 1: Your program   Step 2: Your details   Step 3: Your appointment

Select Location:  
Huntington - Denning Industrial Park  
4512 Ten Mile Ave  
Huntington, WV 25704

Today << > >>

|          | Tu 09/22/20 | Wed 09/23/20 | Thu 09/24/20 | Fri 09/25/20 | Sat 09/26/20 | Sun 09/27/20 |
|----------|-------------|--------------|--------------|--------------|--------------|--------------|
| 09:00 AM | CLOSED      | CLOSED       | CLOSED       |              |              | CLOSED       |
| 09:05 AM |             |              |              |              |              |              |
| 09:10 AM |             |              |              |              |              |              |
| 09:15 AM |             |              |              |              |              |              |
| 09:20 AM |             |              |              |              |              |              |
| 09:25 AM |             |              |              |              |              |              |
| 09:30 AM |             |              |              |              |              |              |
| 09:35 AM |             |              |              |              |              |              |
| 09:40 AM |             |              |              |              |              |              |
| 09:45 AM |             |              |              |              |              |              |
| 09:50 AM |             |              |              |              |              |              |
| 09:55 AM |             |              |              |              |              |              |
| 10:00 AM |             |              |              |              |              |              |
| 10:05 AM |             |              |              |              |              |              |
| 10:10 AM |             |              |              |              |              |              |
| ...      |             |              |              |              |              |              |

Available Appointment Times   Schedule   Not Available   In The Past   Not Available   Subscribers   Not Available

Narrow times   Narrow results by   Before 9 AM   9 AM - 4 PM   After 4 PM   Supercenter locations only

Back   County:   State:   Zip Code: 25704   Distance: 1 mi (2000 ft)   Go

**Registration Step 4, screen 1:**

Applicant will be presented with a confirmation page to check all entered data and appointment information.

The screenshot shows a web browser window with a blue header bar. Below the header, there is a navigation bar with several icons. The main content area is divided into several sections, each with a blue header and a white body. The sections are: 'Personal Information', 'Appointment Information', 'Payment Information', and 'Billing Information'. Each section contains various input fields, some of which are filled with text. At the bottom of the page, there is a blue button labeled 'Submit and Continue'.

After reviewing and editing as necessary, Applicant can click “Submit and Continue”.

### Registration Step 5, screen 1:

Applicant will be presented with final confirmation screen, with appointment details, site address and directions, payment instructions, and reminders.

West Virginia



Step 1: Your program | Step 2: Your details | Step 3: Your appointment | Step 4: Your review | **Step 5: Your confirmation**

#### Print Your Appointment Confirmation and Select Your Payment Method

|   |                            |        |
|---|----------------------------|--------|
|  | DNU WV DHHR TEMP LIVE SCAN | \$0.00 |
|---|----------------------------|--------|

#### Appointment Details:

Name: [REDACTED]  
Registration ID Number: [REDACTED]  
Date: [REDACTED]  
Time: [REDACTED]  
Location: [REDACTED]

[Print](#)

#### Directions:

[REDACTED]

[Get directions from Google Maps](#)

#### Payment Instructions:

Click the "Pay Now" button (which will open a new window) to pay online by credit card or electronic check. If you are unable to complete payment or would like to pay on-site at the time of your appointment, click the "Finish" button.

If you chose to pay on-site at the time of your appointment, please remember that we cannot fingerprint you without payment.

The following payment methods are accepted on-site: money order, business check, or personal check.

#### Reminders:

Remember to bring a photo ID with you to your appointment. Acceptable forms of personal identification must be current and valid and include driver's licenses issued by any state, a passport, photo identification card issued by a municipality, county, or state in lieu of a driver's license, or a military ID.

If you learn that you cannot make your appointment, please call us to reschedule at least 24 hours prior to your scheduled appointment time.

If you need to inquire about the status of your fingerprints and the results, or have general questions about the process, please call our customer service center at (855) 766-7746.

Please [print](#) this page for your records and bring a copy to your appointment.

[Pay Now](#)

[Finish](#)

Applicant can print above page for records, and should note appointment date, time, and other reminders shown.

West Virginia



Location Listing for WV

Locations are subject to change without notice.

Site

Directions

Hours

**Beckley**

On-Site In-Home Drug Testing  
351 Prosperity Road  
Beckley, WV 25801

**Heading North on US-19:**

- 1 Head northwest on US-19 N/W Virginia 16 N/Robert C Byrd Dr
- 2 Take left onto Co Route 19/5/Prosperity Rd
- 3 In 0.6 miles the destination will be on the left

**Heading South on US-19 from Crossroads Mall:**

- 1 Turn right on Robert C Byrd Dr
- 2 In 0.2 miles, take first right onto Prosperity Rd
- 3 In 0.9 miles the destination will be on the right

Monday - Friday  
9:30am - 4:30pm

[Map](#)

**Bridgeport**

Hampton Inn  
1515 Johnson Avenue  
Bridgeport, WV 26330

**\*\*Please note: This site cannot accept credit card payments.\*\***

**From Clarksburg:**

- 1 Merge onto US-50 E toward I-79/Bridgeport
- 2 Merge onto I-79 N toward Fairmont
- 3 Take the CR-24/Meadowbrook Rd. exit, EXIT 121
- 4 Turn right onto CR-24/Johnson Ave
- 5 Hotel is on the right

Wednesday - Thursday  
9:00am - 1:00pm  
2:00pm - 5:00pm

[Map](#)

**Elkins**

Ultra Care  
Home Health Agency LLC  
598 Harrison Ave  
Elkins, WV 26241

**From Buckhannon:**

- 1 Follow US-33 East towards Elkins
- 2 Take the Harrison Ave. exit
- 3 Follow Harrison Ave. for nearly two miles
- 4 Office is across the street, on the right, from the blue NAPA building and between the Speedway and the Custard Stand on Harrison Ave
- 5 Parking is located in the alley behind the building

Tuesday - Thursday  
10:00am - 12:00pm  
1:00pm - 5:00pm

**From Elkins:**

- 1 Office is across the street, on the left, from the blue NAPA building and between the Speedway and the Custard Stand on Harrison Ave
- 2 Parking is located in the alley behind the building

[Map](#)

**Fairmont**

Marion County Senior Citizens  
105 Maplewood Drive  
Fairmont, WV 26554

**From the South:**

- 1 Heading north on US-250, turn left at the intersection of US-250 and Maplewood Drive
- 2 There are grey and red townhomes on the right, after the intersection
- 3 Continue down Maplewood Drive, the site will be on the left

Every other Monday  
10:00am - 1:00pm  
2:00pm - 4:00pm

**From the North:**

- 1 Heading south on US-250, turn right at the intersection on US-250 and Maplewood drive
- 2 There are grey and red townhomes on the left, before the intersection
- 3 Continue down Maplewood Drive, the site will be on the left

Please check schedule for available dates.

The building has a large white steeple

[Map](#)

**Hamlin**

Lincoln County  
 Opportunity Company  
 360 Main Street  
 Hamlin, WV 25523

- 1 Located between Lynn Ave & Court Ave
- 2 Traveling north on Main st. the site is on the right
- 3 There is parking on the right before building

Every other Monday  
 8:00am - 12:00pm  
 12:30pm - 3:00pm

[Map](#)

Please check schedule for for available dates

**Huntington**

Denning Industrial Park  
 4510 Terrace Ave  
 Huntington, WV 25705

**Traveling I-64 E towards Charleston:**

- 1 Take Exit 15 for US-60 W
- 2 Turn left onto US-60 W/Midland Trail
- 3 Turn right onto 5th St
- 4 After crossing over the railroad tracks, the location is the first building on the left

Monday - Wednesday  
 9:00am - 12:00pm  
 1:00pm - 5:00pm

**Traveling I-64 W toward Huntington:**

- 1 Take Exit15 onto US-60W
- 2 Turn right onto 5th St
- 3 After crossing over the railroad tracks, the location is the first building on the left

[Map](#)

**Keyser**

Morphotrust  
 196 North Tornado Way  
 Potomac Plaza  
 Suite 11  
 Keyser, WV 26726

**Heading South on Route 220:**

- 1 Make an immediate right after passing the Wal-Mart parking lot BEFORE passing Ace Hardware
- 2 The road will lead to a strip mall
- 3 The Enrollment Center is located at the left corner of the strip mall. Suite 11

Thursday and Friday  
 9:00am - 1:00pm  
 2:00pm - 5:00pm

**Heading North on Route 220:**

- 1 Make a left into the strip mall after passing Ace Hardware on the left BEFORE passing Wal-Mart
- 2 The road will lead to a strip mall
- 3 The Enrollment Center is located at the left corner of the strip mall. Suite 11

The office is to the left of the fitness club

[Map](#)

**Kingwood**

Preston County  
 Senior Citizens, Inc.  
 108 Senior Center Drive  
 Kingwood, WV 26537

**Heading NW on Piedmont make a right on Clary street:**

- 1 There is a white house on the right at the Heading west of E Main St
- 2 Pass by the Chevrolet Auto dealer on the right
- 3 Make a right when NAPA Auto parts is on the left
- 4 There is a blue sign on the right. Senior Center Drive may be unmarked

Last Wednesday of the month  
 9:00am - 12:00pm  
 12:30pm - 4:00pm

Please check schedule for available dates.

**Heading east on E Main Street:**

- 1 Make a left when NAPA Auto Parts is on the right

[Map](#)

**Martinsburg Winchester**

Martinsburg Shopping Plaza  
 615 Winchester Ave  
 Martinsburg, WV 25401

**From South:**

- 1 Take I-81 North towards Martinsburg
- 2 Take exit 12 for W Virginia 45 toward Winchester Ave/W Virginia 9
- 3 Turn right onto WV-45 E/Apple Harvest Dr
- 4 Turn left onto US-11 N/Winchester Ave
- 5 Office will be on the left in the shopping plaza

Monday, Tuesday,  
 Thursday and Friday  
 9:00am - 5:00pm  
 Wednesday  
 9:00am - 1:00pm  
 2:00pm - 5:00pm

**From North:**

- 1 Take I-81 South to Roanoke
- 2 Take exit 13 toward W Virginia 15/King St /Downtown
- 3 Turn left onto Co Route 15/Tuscarora Pike

[Map](#)

**Morgantown**

Pace Enterprise of WV Inc.  
 889 Mylan Park Lane  
 Morgantown, WV 26501

- 1 From I-79 Exit 155, then 2 miles west on Chaplin Hill Rd
- 2 Turn right onto Mylan Park Ln. next building after Mylan Elementary. There is a large PACE sign out front

Monday - Thursday  
 8:30am - 12:45pm  
 2:00pm - 4:00pm

[Map](#)

**Moundsville**

Change, Inc.  
700 First Street  
Moundsville, WV 26041

**From Wheeling:**

- 1 Merge onto US-250 S/WV-2 S toward I-470
- 2 Take the 1st right onto RW-2/Chapline St. Continue to follow W-2 S
- 3 Merge onto US-250 S/WV-2 S toward I-470 for 9.6 miles
- 4 Turn slight left onto US-250/Jefferson Ave Ext
- 5 Turn right onto 1st St. Location is on the right

Monday, Thursday and Friday  
8:30am - 11:00am  
Tuesday and Wednesday  
8:30am - 3:00pm

Change Inc sits inside the Rev. William Byrd Center that sits between the American Legion and Francine Court Apartments. Applicants are to park on the street.

[Map](#)

**New Cumberland**

Hancock County Senior Services  
647 Gas Valley Road  
New Cumberland, WV 26047

**Directions from Weirton:**

- 1 North on WV Route 2 through New Cumberland
- 2 At intersection of WV Route 8 turn right and head up the hill
- 3 Travel on Route 8 until passing Tomlinson Run State Park entrance on left
- 4 Approximately 1/2 mile past the entrance, exit straight ahead onto Gas Valley Road
- 5 Hancock County Senior Services is located just past Oak Glen High School on the left

Monday, Wednesday and Thursday  
9:00am - 3:00pm

**Directions from Chester:**

- 1 Begin by traveling East on US Route 30
- 2 Travel to the top of the hill and merge right onto connector for WV Route 8, continuing onto WV Route 8
- 3 Travel approximately 3 miles to the entrance to Oak Glen High and Middle School

[Map](#)

**New Martinsville**

Wetzel County Committee on Aging  
145 Paducah Drive  
New Martinsville, WV 26155

**Traveling South from Moundsville:**

- 1 Take Route 2 South for 23 miles
- 2 Turn left onto Co. Rd. 2/9/Paducah Dr.
- 3 Take road for 0.3 miles and destination will be on the left.

Every other Monday  
9:00am - 12:00pm  
1:00pm - 4:00pm

**Traveling North from Paden City:**

- 1 Take Route 2 North for 8.4 miles
- 2 Turn right onto Co. Rd. 2/9/Paducah Dr.
- 3 Take road for 0.3 miles and destination will be on the right.

Please check schedule for available dates.

[Map](#)

**Parkersburg**

SW Resources Inc.  
1024 7th Street  
Parkersburg, WV 26101

- 1 Site is right next to Penzoil and close to KFC

Monday - Friday  
8:30am - 12:00pm  
1:00pm - 3:30pm

[Map](#)

**Point Pleasant**

Pleasant Valley Nursing And Rehab Center  
640 Sandhill Road  
Point Pleasant, WV 25550

- 1 Heading east on Sandhill Rd, make the first right after Pleasant Valley Nursing and Rehab Center sign on right
- 2 Heading west on Sandhill Rd, make a left before passing the Pleasant Valley Nursing and Rehab Center sign on the left

Every other Friday  
9:00am - 12:00pm  
1:00pm - 4:00pm

Entrance to enrollment station will be on the right side of the building

Please check schedule for available dates.

[Map](#)

**Princeton**

Community Connections Inc  
215 South Walker Street  
Princeton, WV 24740

**Coming from 77 North:**

- 1 Take Exit 9 to 460
- 2 Turn right onto 460 (heading west)
- 3 Stay on 460 (will pass through a total of four red lights)
- 4 At the fifth red light take the right onto Ingleside Rd (road not marked but look for the "Welcome to Princeton" sign)
- 5 At the first red light on Ingleside take the left onto Stafford Dr
- 6 At the end of Stafford Dr take the right at the red light onto S Walker
- 7 CCI is the third brick building on the right

Monday, Wednesday, Friday  
10:00am - 3:00pm

**Coming from 77 South:**

- 1 Take exit 1 towards Bluefield directly after East River Tunnel on right
- 2 Turn right onto John Nash Blvd
- 3 Take Princeton exit (first exit off John Nash Blvd)
- 4 Princeton will empty onto 460
- 5 You will pass through three red lights at the fourth light (at Ramey's car lot) take the left onto Courthouse Rd
- 6 Continue on Courthouse Rd it will turn into S Walker St
- 7 CCI is the third brick building on the right

[Map](#)

**Ronceverte**

Mountain Heart Community  
Services Inc. Workforce WV  
25 Red Oak Shopping Center  
Ronceverte, WV 24970

**Coming from the Ronceverte area:**

- 1 Follow 219 North to Fairlea
- 2 The Workforce center is at the top of Ronceverte Hill on the right behind the Kroger the fuel station

Monday - Friday  
9:00am - 4:00pm

**Coming from the Alderson area:**

- 1 Follow Rt 63 toward Ronceverte
- 2 Turn left onto Davis Stuart Rd and continue on this road until you pass the hospital on the left
- 3 Davis Stuart Rd merges with 219 South at the intersection in front of the hospital
- 4 Follow 219 South passing Kroger, Wendy's and Magic Mart
- 5 Turn right into the parking lot
- 6 The Workforce center is on the left behind the Kroger fuel station

[Map](#)

**South Charleston**

MorphoTrust USA  
38 River Walk Mall  
South Charleston, WV 25303

**From I-64 W to MacCorkle exit:**

- 1 Turn Right off exit East bound on US-60/MacCorkle
- 2 Riverwalk Mall is 3/4 mi on the left, North Side of the Rd
- 3 Enter the shopping center at the traffic light
- 4 Turn right then immediately turn left the MorphoTrust space is next to the Electric Beach tanning salon

Monday - Friday  
8:00am - 6:00pm

The address comes up as 38 Riverside Drive on the GPS

[Map](#)

**Stollings**

Quality Drug Testing  
4130 Hanging Rock Highway  
Stollings, WV 25646

**From Logan:**

- 1 Take Rt 10 towards Man
- 2 After you pass Go Mart and Pizza Hut, turn right at the lights
- 3 You will go over 2 sets of railroad tracks
- 4 You will go past a Save Way gas station and car wash
- 5 You will see an exit to Rum Creek Junction on the left
- 6 Office is in a brown building directly across from where you exit to Rum Creek, on the right side of the road

Monday - Friday  
9:00am - 4:00pm

[Map](#)

**Summersville**

Seneca Health Services, Inc.  
804 Broad Street  
Summersville, WV 26651

- 1 Located across the street from Pizza Hut

Wednesday  
9:00am - 11:30am  
12:30pm - 4:00pm

[Map](#)

**Sutton**

Central WV Aging Services Inc.  
101 2nd Street  
Sutton, WV 26601

**From Charleston:**

1. From I-79 take Exit 62. Turn left at exit ramp.
2. Travel approximately 2 miles into Sutton. You will pass the Sutton Rite Aid on the right. Continue straight until you see a brick church on the right.
3. You will turn right before you pass the church onto a brick road. The road will lead directly into a large parking lot. We are located on the second floor of City National Bank. Please enter through the back entrance and take the elevator to the second floor.

Every other Friday  
10:00am - 2:00pm

Please check schedule for available dates.

**From Clarksburg:**

1. From I-79 take exit 67. Turn left at the exit ramp.

[Map](#)

**Welch**

McDowell County  
Commission on Aging  
725 Stewart Street  
Welch, WV 24801

1. Located near Central Ave. 104 mi from Charleston, WV. Traveling on I-64 E to I-77 S.

Last Thursday of the month  
10:00am - 12:00pm  
12:30pm - 4:00pm

[Map](#)

Please check schedule for availability.

[Back](#)

If you have any questions, please call MorphoTrust USA at (855) 766-7746



WV DHHR BCF  
INSTRUCTIONS FOR HARD  
CARD  
FINGERPRINT SUBMISSIONS



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin  
Governor

Bureau for Children and Families  
Deputy Commissioner Office of Operations  
350 Capitol Street, Room 730  
Charleston, West Virginia 25301-3704  
Telephone: (304) 356-4515 Fax: (304) 558-6646

Karen L. Bowling  
Cabinet Secretary

**Procedure for submitting hard card CIB(State) fingerprints**

Make sure the card is the **Blue Applicant Card, FD-258**.

**NOTE:** Only use Black or Blue ink pens to fill in information on fingerprint cards. No glitter pens or other colors will be accepted.

CLEARLY print Applicant's name at the top of the card in the space provided.

Have the Applicant sign the card in the "Signature of Person Fingerprinted" box.

Fill in the "Residence of Person Fingerprinted" with the Applicant's mailing address. This MUST match the "Address of Applicant" on the Fingerprint Authorization Sticker (WVSP-39).

The "Employer and Address" is the name and address of the facility for which the CIB is needed.

The "Reason Printed" is the Applicant's job title.

Under "Aliases/AKA", list all names the Applicant has used, usually for maiden & prior married names.

Under "Citizenship/CTZ", list the Applicant's country of citizenship.

Under "Your No./OCA", Leave **BLANK!**

Under "FBI No./FBI", Leave **BLANK!**

Under "Armed Forces No./MNU", Leave **BLANK!**

Under "Social Security No./SOC", enter the Applicant's Social Security Number. This cannot be blank!

In the box marked "ORI", it should be pre-stamped with three lines, "**WV920080Z – OFFICE OF SOC SERV - Charleston, WV**". If it is blank, print this information in. If there is another number, white-out and print this information in.

Fill in the "Identifying Information". This is "Sex", "Race", "HGT/Height", "WGT/Weight", "Eyes (Color)", and "Hair (Color)". This is usually found on a State issued Driver's License or Identification Card.

In the "Date of Birth/DOB" box, enter the Applicant's birth date in MM/DD/YY format. This box cannot be left blank!

In the "Place of Birth/POB" box, enter the **state** (US) or country (Non-US) the Applicant was born in.

The Applicant is now ready to be printed. If you are going to be printing the Applicant, your signature will go on the front of the fingerprint card under "Signature of Official Taking Prints". If the Applicant is going to a police officer for printing, the officer must sign in this box.

**YOU CANNOT TAKE YOUR OWN FINGERPRINTS!**

In the case of an error taking a fingerprint, an authorized re-tab sticker may be used. These must come from the Sirchie Fingerprint Supply. There can also be no more than ONE re-tab sticker used per block (do not "stack" them).

After the Applicant has been printed, and there are no errors with the printing, have the Applicant fill out the Fingerprint Authorization Sticker (WVSP-39), with their mailing address (Which **MUST** match the Residence of Person Fingerprinted on the fingerprint card), and sign the sticker. In the top right hand corner, there is a blank for a "Facility Number". This is an eight digit number that begins with a "3". (An example of a facility number is 30108523). This must be filled in on each Fingerprint Authorization Sticker and cannot be left blank. If you do not know your facility number, please contact your licensing specialist.

After the Fingerprint Authorization Sticker has been completed, place it on the back of the completed Fingerprint Card, over the three sample prints.

The next step is to have the Applicant fill out a "Statement of Criminal Record" form from WVDHHR. The FACTS ID# on this form is the Facility Number as mentioned above. The Facility/Provider blank is the Facility name. The Address is the complete mailing address, including city, state, and zip code of the facility. Have the Applicant print their name, any maiden names or aliases, their Social Security Number, and their Date of Birth on this form in the spaced provided. Under the Declaration section of this form, the Applicant must read and fill in this section appropriately. If there are any crimes or citations for which the Applicant is unsure of, it is always better to list something that does not show on the CIB than to leave it blank. The last step of filling this form out is for the Applicant to sign and date in the blanks at the bottom of the form.

Paper clip, NEVER STAPLE, the Fingerprint Card and the Statement of Criminal Record together and mail in an appropriately sized envelope to:

WV DHHR – Bureau for Children & Families  
Office of Operations  
350 Capitol Street, Room 730  
Charleston, WV 25301  
Attn: CIB/FBI Unit

**PLEASE NOTE:** If a person would like to provide a backup card, in case of rejection. Submit a second fingerprint card with the Fingerprint Authorization Sticker, which is referenced in the previous document.

Abbreviations to be used for Eye Color:

|       |     |
|-------|-----|
| Blue  | BLU |
| Red   | RED |
| Green | GRN |
| Hazel | HAZ |
| Brown | BRN |
| Black | BLK |
| Grey  | GRY |

Abbreviations to be used for Hair Color:

|        |     |
|--------|-----|
| Brown  | BRN |
| Black  | BLK |
| Red    | RED |
| Blonde | BLD |
| Grey   | GRY |
| White  | WHT |



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin  
Governor

Bureau for Children and Families  
Deputy Commissioner Office of Operations  
350 Capitol Street, Room 730  
Charleston, West Virginia 25301-3704  
Telephone: (304) 356-4515 Fax: (304) 558-6646

Karen L. Bowling  
Cabinet Secretary

**Procedure for submitting FBI(NCIC) hard card fingerprints**

Make sure the card is the **Blue Applicant Card, FD-258**.

**NOTE:** Only use Black or Blue ink pens to fill in information on fingerprint cards. No glitter pens or other colors will be accepted.

CLEARLY print Applicant's name at the top of the card in the space provided.

Have the Applicant sign the card in the "Signature of Person Fingerprinted" box.

Fill in the "Residence of Person Fingerprinted" with the Applicant's mailing address.

The "Employer and Address" is the name and address of the facility for which the FBI is needed.

The "Reason Printed" is the code **49-2b-8**.

Under "Aliases/AKA", list all names the Applicant has used, usually for maiden & prior married names.

Under "Citizenship/CTZ", list the Applicant's country of citizenship.

Under "Your No./OCA", Leave **BLANK!**

Under "FBI No./FBI", Leave **BLANK!**

Under "Armed Forces No./MNU", Leave **BLANK!**

Under "Social Security No./SOC", enter the Applicant's Social Security Number. This **cannot** be blank!

In the box marked "ORI", it should be pre-stamped with three lines, "WV920080Z – OFFICE OF SOC SERV - Charleston, WV". If it is blank, print this information in. If there is another number, white-out and print this information in.

Fill in the "Identifying Information". This is "Sex", "Race", "HGT/Height", "WGT/Weight", Eyes (Color), and Hair (Color). This is usually found on a State issued Driver's License or Identification Card.

In the "Date of Birth/DOB" box, enter the Applicant's birth date in MM/DD/YY format. This box cannot be left blank!

In the "Place of Birth/POB" box, enter the state (US) or country (Non-US) the Applicant was born in.

The Applicant is now ready to be printed. If you are going to be printing the Applicant, your signature will go on the front of the fingerprint card under "Signature of Official Taking Prints". If the Applicant is going to a police officer for printing, the officer must sign in this box.

**YOU CANNOT TAKE YOUR OWN FINGERPRINTS!**

In the case of an error taking a fingerprint, an authorized re-tab sticker may be used. These must come from the Sirchie Fingerprint Supply. There can also be no more than ONE re-tab sticker used per block (do not "stack" them).

After the Applicant has been printed, and there are no errors with the printing, have the Applicant fill out the Fingerprint Authorization Sticker (WVSP-39), with their mailing address (Which **MUST** match the Residence of Person Fingerprinted on the fingerprint card), and sign the sticker. In the top right hand corner, there is a blank for a "Facility Number". This is an eight digit number that begins with a "3". (An example of a facility number is 30108523). This must be filled in on each Fingerprint Authorization Sticker and cannot be left blank. If you do not know your facility number, please contact your licensing specialist.

Make a copy of the front of the fingerprint card. Make sure the name and address of the facility is on the copy and paper clip the copy to the card. NEVER STAPLE.

Enclose the \$30.25 check for each FBI card, made payable to "Office of Children and Adult Services".

**PLEASE NOTE:** If a person needs **both** a CIB and FBI background check, **TWO** sets of fingerprints are needed, one FBI print card, which this document references, and one CIB print card with the Fingerprint Authorization Sticker which is referenced in the previous document.

Mail to:

WV DHHR – Bureau for Children & Families  
Office of Operations  
350 Capitol Street, Room 730  
Charleston, WV 25301  
Attn: CIB/FBI Unit