REQUESTER NAME

ADDRESS

PENNSYLVANIA STATE POLICE REQUEST FOR CRIMINAL RECORD CHECK VOLUNTEER ONLY

1-888-QUERYPA (1-888-783-7972)

FOR CENTRAL REPOSITORY USE ONLY

CONTROL NUMBER

AFTER COMPLETION MAIL TO:

PENNSYLVANIA STATE POLICE

This form is to be completed in ink by the requester – (information will be mailed to the requester only). If this form is not legible or not properly completed, it will be returned unprocessed to the requester. <u>A response may take four weeks or longer.</u>

TRY OUR WEBSITE FOR A QUICKER RESPONSE https://epatch.state.pa.us

CITY/STATE/		CENTRAL REPOSITORY – RCPU 1800 ELMERTON AVENUE HARRISBURG, PA 17110-9758			
TELEPHONE NO. (AREA CODE)					
SUBJE(CT OF RECORD CHECK				
(FIRST) (MIDDLE)		(LAST)	(LAST)		
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	SEX	RACE	
VOLUNTEER'S AGENCY/ORGANIZATION (MANDATORY)		TELEPHONE NUMBER	TELEPHONE NUMBER		
The Pennsylvania State Po	olice response will be based on the on contained in the files of the Penns	comparison of the data pro sylvania State Police Centr	ovided by the ral Repositor	requester y only.	
By signing this form, I verify the status as an unpaid volunteer	hat I am submitting this request for crir r. I understand that the \$8 fee is being	ninal history record informati waived because of my statu	ion in connect us as an unpa	ion with my id volunteer.	
REQUESTER SIGNATURE (*Signature required for processing*)		DATE			
WARNING: 18 Pa.C.S. 4904(t	b) UNDER PENALTY OF LAW - MISIDENTIFIC ATION OF ANOTHER IS PUNISHABLE AS AU	CATION OR FALSE STATEMENTS THORIZED BY LAW.	OF IDENTITY T	O OBTAIN	