

VECHS - Volunteer & Employee Criminal History Service Application for Qualified Entities

SHP-980G 04/2024

Thank you for your interest in the Missouri State Highway Patrol's (MSHP) VECHS program, administered by the Criminal Justice Information Services (CJIS) Division.

The Missouri VECHS program is intended for entities providing services specifically focused on one or more of the vulnerable populations - children, the elderly, or persons with disabilities. Criteria for participation is set forth by the National Child Protection Act (NCPA) (1993), as amended, the Federal Bureau of Investigation (FBI), and section 43.539 Revised Statutes of Missouri (RSMo). In addition, the VECHS program includes the authority granted by the Adam Walsh Child Protection and Safety Act, for private K-12 schools.

Through the Missouri VECHS program, the MSHP and FBI provide state and national criminal history record information (CHRI) on applicants, employees, and volunteers to qualified entities or organizations in Missouri. With fingerprint-based criminal history, the entities can more effectively screen out current and prospective applicants, employees and volunteers who are not suitable for contact with children, the elderly, or persons with disabilities.

To be considered for participation in the Missouri VECHS program as a qualified entity, the entity must provide care, care placement, or educational services for children, the elderly, or persons with disabilities, as defined in section 43.539 RSMo., and the NCPA, as amended.

Once the MSHP CJIS Division's VECHS program team reviews the entity eligibility, further instructions, forms, and training will be provided prior to access. Training is required to ensure VECHS program guidelines are clearly understood, and a compliance audit will be conducted within the first 12 months of activation.

The secondary dissemination of CHRI received from the MSHP and FBI is very restrictive and governed by numerous state and federal laws. Information is considered CHRI if it confirms the existence or nonexistence of CHRI. VECHS participating entities are strictly prohibited from disseminating CHRI outside of Missouri. Any unauthorized dissemination to another agency or organization, or dissemination outside of Missouri may result in immediate deactivation. Entities requesting participation must have the sole authority for hiring and eligibility decisions based on the receipt of CHRI for care provided by their agency to vulnerable citizens (children, the elderly or persons with disabilities.) Applicants required to be fingerprinted by an entity must meet the definition of applicant, as defined in section 43.539 RSMo., and the NCPA, as amended.

There is no fee charged for participation in the Missouri VECHS program. The only fees associated are those required with fingerprint submissions, pursuant to section 43.530 RSMo., and the federal register.

Note: Staffing entities, workforce placement agencies, or organizations are not eligible for participation in VECHS, as services provided are not consistent with the criteria of the NCPA, as amended, and section 43.539 RSMo.

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ENTITY INFORMATION

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|--|----------------|-------|-----|--------|
| Entity Name | | | | |
| Mailing Address | Street Address | | | Unit # |
| | City | State | Zip | County |
| | Street Address | | | Unit # |
| | City | State | Zip | County |
| Physical Operating Address: | | | | |
| <input type="checkbox"/> Check here if Physical Address is same as Mailing Address | Street Address | | | Unit # |
| | City | State | Zip | County |
| | Street Address | | | Unit # |

CONTACT INFORMATION

| | | | |
|--------------------------------|--|-----------------|--|
| Contact Person: | | | |
| Phone: | | Ext.: | |
| E-mail Address: | | Fax: | |
| Entity Head: (Please Print) | | E-mail Address: | |

SUMMARY OF SERVICES

Legal Type of Agency: Governmental (Public) Private, Not-Profit Private, For-Profit

| Please check all that apply to the service(s) your entity provides to children, the elderly, or the disabled: | | | | | |
|--|-------------------|------------------------------------|-------------|------------|----------------|
| Vulnerable Population Served | Care or Treatment | Education, Training or Instruction | Supervision | Recreation | Care Placement |
| Children | | | | | |
| Elderly | | | | | |
| Disabled | | | | | |
| <p>Please describe in detail the services your entity will provide and how those services will impact children, the elderly, or the disabled (continue on a separate page, if necessary):</p> | | | | | |

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Are you a K-12 private school? YES NO

Please provide a list of each position that you would request a state and national criminal history record check on through the Missouri VECHS Program. Please include the duties for each as they relate to the services provided. (Continue on a separate page, if necessary.)

| Title / Position | Job Duties / Description |
|------------------|--------------------------|
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If approved, approximately how many applicants, employees and volunteers will be fingerprinted during the next 12 months?

(Note: contractors may be fingerprinted as applicants through the VECHS program, if they have or may have access to children, the elderly, or persons with disabilities. Contractors must be employed / contracted directly with your agency.)

Do you have in-house Human Resource staff for hiring and eligibility decisions?

Yes, In-house employees No, we use a third party

Do you have a corporate office / affiliation located outside of Missouri? Yes No

If yes to the above, will they have access to the criminal history results? Yes No

Do you understand that current or prospective applicants, employees, and volunteers that are otherwise statutorily required to receive a state and national criminal history record check are not eligible for the Missouri VECHS program?

Yes No

Do you intend to request state and national criminal history record checks on applicants, employees, and volunteers currently residing outside of the state of Missouri? If yes, please explain.

Yes No

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Are you currently required by state statute to obtain state and national criminal history record checks on any of your current or prospective applicants, employees and volunteers?

Yes No

If yes to the above question, what state or federal agency monitors your agency and requires these criminal history record checks?

It is your responsibility to determine if your agency is otherwise statutorily required to complete criminal history record checks on applicants, employees, and volunteers. **Please verify your statutory requirements for criminal history record checks prior to submitting your application.** If you have questions regarding eligibility, please contact the Missouri VECHS Program, at (573) 526-6153, ext. 5098 or email: MOVECHS@mshp.dps.mo.gov.

This form must be completed in full, signed and dated. Failure to include responses to questions may result in the application being rejected / denied. Any false or misleading information will result in denial of request.

Signature of Point of Contact: _____ Date: _____

Signature of Entity Head: _____ Date: _____

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| <p>Submit to:</p> <p>Missouri State Highway Patrol Missouri VECHS Program PO Box 9500 Jefferson City, MO 65102-9500</p> <p>FAX: (978) 244-8842 Email: MOVECHS@mshp.dps.mo.gov</p> |
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| <p>MSHP Use Only</p> <p>Approval Date: _____ ORI / OCA: _____</p> <p>MACHS Code: _____ Denial Date: _____</p> |
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