State of New Hampshire

Department of Safety
DIVISION OF STATE POLICE

Criminal Records Unit
33 Hazen Drive, Concord, NH 03305

CRIMINAL HISTORY RECORD INFORMATION RELEASE AUTHORIZATION FORM

INSTRUCTIONS

NH RSA 1064:14 and Administrative Rule Saf-C 5700 authorizes the dissemination of NH Criminal History Record Information (CHRI) for non-criminal justice purposes. In NH, all CHRI is confidential and released only upon the knowledge and permission of the individual of whom the request is made. Individuals requesting their own record In person need only complete Section I. If the CHRI Is to be released to a third party, both Section I and Section II must be completed. All requests by mail must have both sections completed and Section II notarized, (not required).

SECTION I (PLEASE PRINT CLEARLY)

Last Name_____ **First Name**_____ **Maiden**_____ **MI**____

Address_____ **City**_____ **State**____ **Zip**_____

Date of Birth_____ **Hair Color**_____ **Eye Color**_____ **Male** ☐ **Female** ☐

Driver's License Number_____ **State**_____

My signature below signifies I am the individual listed above and the information provided is true.

--> **Signature**_____ **Date**_____
Signed under penalty of unsworn falsification pursuant to RSA 641:13

PURPOSE OF RECORD

☐ **Housing** ☐ **Employment** ☐ **Annulment/Expungement** ☐ **Other** Volunteer

SECTION II

I hereby authorize the release of my criminal record conviction(s), if any, to the following:

Person or Entity to Receive Record Diocese of Manchester

Address 153 Ash Street **City** Manchester **State** NH **Zip** 03104

--> **Your Signature**_____ **Date**_____

~~**Notary's Signature(not required)**~~_____ **Date**_____

Signature of person/entity to receive record Diocese of Manchester **(Affix seal)** **Date**_____

RECORD CHALLENGE

Saf-C 5703.12 Procedure for Correcting a CHRI (a) Persons or their attorneys desiring access to their CHRI for the purpose of challenge or correction shall appear at the central repository. (b) A copy shall be provided to a person if after review he/she indicates he/she needs the copy to pursue the challenge. (c) Any person making a challenge shall identify that portion of his/her CHRI which he/she believes to be inaccurate or incorrect, and shall also give a correct version of his/her record with an explanation of the reason that he/she believes his/her version to be correct. (d) The Director shall take the following actions within 30 days of receipt of challenge: (1) Review the records and contact the law enforcement agency or court which submitted the record to compare the information to determine whether the challenge is valid; (2) If the challenge is valid, which means there is a discrepancy between the information submitted and the information maintained by the law enforcement agency or court, the record shall be corrected and the person and appropriate CJAs shall be notified; and (3) If the challenge is invalid, the person shall be informed and advised of the right to appeal pursuant to RSA 541. (e) When a record has been corrected, the division shall notify all non-criminal justice agencies, to whom the data has been disseminated in the last year, of the correction. (f) The person shall be entitled to review the information that records the facts, dates, and results of each formal stage of the criminal justice process through which he passes, to ensure that all such steps are completely and accurately recorded.

WARNING: The Division of State Police is the Criminal Record Repository for the State of New Hampshire. The record you have received is based only on what has been reported to the Repository and may not be a complete Criminal History Record of the named individual.

☐ **To prevent a delay in processing, I have enclosed a self-addressed envelope.**

☑ **Prepaid Acc't Number** 810018034

A $25.00 fee is required for each request. Make checks payable to: State of NH - Criminal Records.

DSSP256 (rev. 09/2022) Parish/School Name: _____ Town: _____ Employee ___ Volunteer ___