

FINGERPRINT NOTIFICATION

Incorporated by Reference in Rule 11B-27.00211(2)(a), F.A.C.

CJSTC
62

Please type or print in black or blue ink and use capital and small letters for names, titles, and addresses

1. Last Four Digits of Social Security Number: _____

2. Officer's Name: _____
Last First MI**Notice**Section 943.13(5), F.S., requires that notification be submitted to the
Criminal Justice Standards and Training Commission upon receipt of the officer's processed fingerprints.

3. Agency ORI: FL _____

4. Agency Name: _____

5. Employment Date: _____

6. Employment Type for Correctional Officers:

Full-time Part-time Auxiliary Special Elected or Appointed

7. Fingerprint date

a. Date: _____ If no criminal record was found. Enter the search date (date "sent") located near the top of the
FDLE/FBI Civil Applicant Response memo.b. Date: _____ If a Florida criminal record was found. If "single-state offender," enter the search date (date "sent")
located near the top of the FDLE/FBI Civil Applicant Response memo.c. Date: _____ If a National criminal record was found. (Unknown as to national record status) wait to receive the
civil applicant response from the FBI and enter the search completion date located at the left-hand
side of the FBI Civil Applicant Response memo.8. _____
DMS, DCF or FDLE Administrator or Designee's Signature9. _____
DMS, DCF or FDLE Administrator or Designee's Name and Title10. _____
Date Signed

INSTRUCTIONS FOR COMPLETING FORM CJSTC-62

This form shall be completed for Private Correctional Institutions and Jails pursuant to Rule 11B-27.00211(2), F.A.C.

1. **Private correctional institutions under contract with the Florida Department of Management Services (DMS) or the Florida Department of Children and Families (DCF) shall submit for processing an applicant's fingerprints to the Florida Department of Law Enforcement.**
 - A private correctional institution is required to use an electronic fingerprinting submission device and is responsible for any cost associated with the fingerprint submission.
 - The response to the fingerprint submission shall be electronically transmitted to the DMS or DCF for review for compliance with Section 943.13(4), F.S.
 - The DMS or DCF will complete and sign the Fingerprint Notification, form CJSTC-62, and submit it to the private correctional institution.
2. **All other private correctional institutions and jails shall submit an applicant's fingerprints for processing to the Florida Department of Law Enforcement.**
 - The private correctional institution is required to use an electronic fingerprinting submission device and is responsible for any cost associated with the fingerprint submission.
 - The response to the fingerprint submission shall be electronically transmitted to the Florida Department of Law Enforcement, Officer Records Section, to be reviewed for compliance with Section 943.13(4), F.S.
 - The Florida Department of Law Enforcement's Officer Records Section will complete and sign form CJSTC-62 and submit it to the private correctional institution or jail.

HOW TO COMPLETE EACH ITEM

1. **Last Four Digits of Social Security Number.** Enter the officer's social security number as in this example: **000-00-1234**.
2. **Name.** Enter the officer's legal last and first name. If the officer has a middle initial enter it above (MI).
3. **Agency ORI.** Enter the last seven digits of the agency's originating agency identifier number. There are nine digits in agency ORI codes. The first two digits have been entered and are FL. Enter as in this example: FL037000.
4. **Agency Name.** Enter the agency's correct name.
5. **Employment Date.** Enter the date the officer began working for the agency. Enter as in this example: 05-06-1990.
6. **Employment Type.** Enter X in the box by the officer's employment status. For example: Flamingo County Jail employs John Mason as a full-time correctional officer, enter X in the box beside "Full-time" under "Correctional" for John's employment type.
7. **Fingerprint Date.**
 - a. Enter the FBI Civil Applicant Response date.
 - b. If "single-state offender," enter the search date (date "sent") located near the top of the FDLE/FBI Civil Applicant Response memo.
 - c. For unknown offenders use the date on the FBI Civil Applicant Response form as in this example: 09-23-1991.
8. **DMS, DCF, or FDLE Administrator or Designee's Signature.** The DMS, DCF, or FDLE Administrator or Designee shall sign his or her name.
9. **DMS, DCF, or FDLE Administrator or Designee's Name and Title.** Type or print the DMS, DCF, or FDLE Administrator or Designee's name and title.
10. **Date Signed.** Enter the date on the line the DMS, DCF, or FDLE Administrator or Designee signed this form as in this example: 05-24-1991.