

Completing the Affidavit and Criminal Conviction Statement

**PLEASE NOTE THAT THERE HAVE BEEN CHANGES
MADE TO THE FORM AND TO THE PROCEDURES.**

The Criminal Conviction Statement and Affidavit must be filled out completely and correctly in order to start lab.

Due to state regulations you can not attend lab at the ACC Lab School or in a community child care center until all documents are correctly filled out and turned in and the ACC Child Development Department has received notice that you have cleared the background name check from TDFPS. ALL students, even if you are completing your lab at your workplace, will be submitted to TDFPS.

The Child Development Department will provide a notary on the first day of class only. If you are unable to have your affidavit notarized at that time, please have the affidavit notarized by the next class period. Even if you are attending lab at your workplace, the affidavit must be notarized.

For the Affidavit:

- One type of photo identification must be provided to the notary.
- The Notaries from the Child Development Department will be in class during the first week to notarize your affidavit.

Other methods of having your affidavit notarized outside of class:

- Your bank may have a notary; the Child Development Department located at the Eastview Campus, and any ACC campus Admissions and Records office. Additionally, the *Yellow Pages* have a listing of notaries. Most notaries charge – ACC does not charge for this service.

Completing the Criminal Conviction Statement:

- Review the offenses on the back of the form carefully.
- This is a legal document that must be completed in pen. NO PENCILS
- Initial each box if the statement is true or yes. Even if you are doing your lab at your workplace, you will be submitted to TDFPS by the ACC Child Dev. Dept. **IF YOU ARE UNABLE TO INITIAL A STATEMENT ON THE FORM PLEASE DESCRIBE THE OFFENSE ON THE BACK.**
 - You may speak with your instructor, the ACC Child Development Department Chair, Gale Spear, 223-5201 or ACC Lab School Director, Dawn Leach, 223-5206, if you have questions regarding your criminal history. Please note on the back of the criminal conviction statement or notify your instructor, the Dept. Chair, or Lab School Director if a risk assessment has been done on you by your workplace.
 - *Please understand that you are required to notify the lab school director or the department chair within 24 hours if you become the subject of an indictment or offense. You WILL be withdrawn from child development classes should a criminal record, including pending felony charges, be returned from TDFPS and you did not disclose that information on your form.*
- **You must initial box 11.** Misrepresenting information **will** result in withdrawal from this course and may result in disciplinary action by ACC.
- Complete the information requested in the table. **All** fields are required.
- **Race and Ethnicity** must be completed. If you have had a criminal conviction statement run prior to this term, the **Race and Ethnicity** must be consistent with the previous submission. *Mismatches will result in an error that will delay your lab start.*
- Complete **all** of the information in the table except the **gray boxes**. **Sign and date the form.**

Example of a CORRECTLY Completed Criminal History Form

- | | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. T.E.O. | I have reviewed the list of criminal offenses listed on the back of this form. |
| 2. T.E.O. | I do not have a felony or misdemeanor conviction for any of the listed offenses. |
| 3. T.E.O. | I am not currently the subject of an indictment or an official criminal complaint for any of the listed offenses. |
| 4. T.E.O. | I have not been the subject of a child abuse investigation that was determined to have a sustained finding of physical or sexual abuse that meet a preponderance of the evidence standard. |
| 5. T.E.O. | I am not currently the subject of a child abuse investigation or neglect investigation. |
| 6. T.E.O. | I do not have any other criminal history for which I received a felony conviction within the past ten years. |
| 7. T.E.O. | I am not currently under investigation for a criminal felony or have a pending charge for any criminal felony. |
| 8. T.E.O. | I have not been the subject of a child abuse or neglect investigation with findings that meet the preponderance of evidence standard. |
| 9. T.E.O. | I will notify the ACC Children's Lab School Director or the Child Development Department Chair within 24 hours if I am the subject of an indictment or offense. |
| 10. T.E.O. | I have read this complete form and certify that it is true and correct. I understand that the information provided will be submitted to the TDFPS or another appropriate agency for a criminal background check. |
| 11. T.E.O. | <u>I understand that if any criminal record with a felony, including a pending felony charge, is returned as a result of my criminal background, I will be withdrawn from child development courses.</u> |

Please complete the information below:

First Name TERRELL		Middle Name (not maiden name) ELDORADO		Last Name OWENS		Social Security Number 999-99-9999		
Type of ID: Driver's License <input checked="" type="checkbox"/> State Issued ID <input type="checkbox"/>		ID Number 1234567	Issuing State TX	Date of Birth 12-07-1973		Sex Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>		
Street Address 1234 Lisa's House Drive			Apt #	City Dallas		Zip 75062		
County Tarrant		Telephone no. (A/C) 214-555-9999		Email Address terrell.owens@g.austincc.edu				
Other Cities of Residence in Texas Austin		Out of State Resident in the last 5 years? If yes, an FBI check will be required. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous Address(es) Outside of Texas, include County: 666 McNabb Blvd Philadelphia, PA				
Ethnicity (must accompany race) <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Other		Race: <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input checked="" type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White						
Date of Hire/ Use by the Facility or Agency				Relationship of Person to Center : VOLUNTEER				
Other names used (married, maiden, etc.) First name:			Middle name		Last name			
LIST ALL CDEC/TECA COURSES YOU ARE TAKING THIS TERM. Place the course you are completing this form in on line #1.						FOR FACULTY AND STAFF ONLY Check Placement Site Below		
1.	CDEC - 1456					Community	Place of Employment	Children's Lab School
2.	TECA - 1311					<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.						x <i>Lisa Carter</i>		
4.						Faculty/Staff Signature (signifies review)		
x <i>Terrell Owens</i>				11-18-2008		Course: CDEC 1301 Synonym: 12345		

Student Signature

Date