

NON-PROFIT DECLARATION

Arizona Revised Statutes §41-1750.G.23 states that the central state repository at the Arizona Department of Public Safety is authorized to exchange criminal history information as follows:

With a nonprofit organization that interacts with children or vulnerable adults for the lawful purpose of evaluating the fitness of all current and prospective employees, contractors and volunteers of the organization. The criminal history record information shall be provided on submission of the applicant fingerprint card and the prescribed fee.

To affirm your organization's eligibility as a fingerprint-based criminal history recipient under this statute, first review the statements below. Then initial next to each statement and provide explanation where indicated. Sign, date, and return this form using one of the methods below.

Agency Name _____

If the agency is registered with the Arizona Corporation Commission under a different name or parent organization, write that name here:

Read the statements below and initial each one to verify.

_____ This agency is a non-profit organization.

_____ This agency interacts with children and/or vulnerable adults.

Please briefly describe your organization's contact with children and/or vulnerable adults. (Examples: private school, sports program for disabled, child/youth ministry, educational tours for children, etc).

Print Name _____ Contact Phone _____

Signature _____ Date _____

Return this form in one of the following ways:

Mail

Arizona Department of Public Safety
Access Integrity Unit
Attn: Noncriminal Justice Compliance
P.O. Box 6638 | MD 3160
Phoenix, AZ 85005-6638

Fax

(602) 223-2926
Attn: AIU - Noncriminal Justice
Compliance

Email

NCJA@azdps.gov
Subject line: Non-profit Declaration