EdAdvance’s 
Fingerprint Requisition Form 
for a CT Technical High School, Charter 
School, or Magnet School Employee

Need to Make a Fingerprint Appointment? 
Call EdAdvance: 
To make a fingerprint appointment at our Litchfield or Danbury location, call our Litchfield office 860.567.0863. The office is open 8:30 am – 4:30 pm (Monday – Friday).

Fees Reflected Below: Please note EdAdvance will honor an $8 discount off their regular $24 processing fee to $16 ONLY if your school is located in one of EdAdvance’s 29 membership districts.

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School Employee:

**Please bring with you:**

- Certified Bank Check or Money Order in the amount of **$88.25** ($75 State fee + $13.25 FBI fee) made payable to EdAdvance and this completed requisition form. **NOTE:** Cash, Credit Card, Debit Card or Personal Check will **NOT** be accepted.
- Government-issued photo ID, such as a current driver’s license or passport, know your full social security number, date of birth, and the city & state of birth.
- A completed, dated & signed original of the Criminal History Record Information Requisition Form “CHRI” Requisition Form with the appropriate statute and fees reflected. Only your school can complete and provide you with this CHRI Requisition Form. **Note:** If Federal Statute, NCPA/VCA, is chosen, you will need to bring a copy of the NCPA/VCA Waiver and Consent Form with you to your scheduled fingerprint appointment. Your school can provide you with this waiver and consent form.

**SCHOOL PERSONNEL** (Please check applicable box):

☐ Please bill our school for EdAdvance’s discounted processing fee of **$16.00 only**. (Checking this box will apply only if school employee brings payment of **$88.25**, as reflected in the 1st bullet above.

☐ Please bill our school for EdAdvance’s FULL fingerprint expense of **$104.25** ($13.25 FBI fee + State Fee $75 + $16.00 EdAdvance’s discounted processing).

Applicant’s Name: ________________________________

Position: ________________________________

School Name: ________________________________ Date: __________________

Authorized by: ________________________________

Authorized Signature: ________________________________

EdAdvance is an equal opportunity provider and employer. 
To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Washington, DC 20250-9410.