



Criminal History System Access Consent

The Criminal History System (CHS) makes it possible for law enforcement agencies to:

- add, correct, or request deletion of arrest data previously submitted fingerprints;
- review suspended court dispositions, and
- notify the court when name, date of birth, controlling agency, or law enforcement case number errors are found.

The booking, controlling, or arresting agency from the submitted fingerprints may add, modify, or request deletion of the arrest data. *Your agency may grant that authority to another law enforcement agency.*

The BCA recommends the following:

- Central booking agencies or any agency that routinely fingerprints individuals for other agencies should provide access to the agencies they print for. Agencies that do not fingerprint subjects should limit access to avoid duplication of work and minimize potential conflicts.
- Sheriffs' offices should grant rights to the State Patrol districts operating within their jurisdictions because they arrest and book subjects in more than one jurisdiction.

Agency Granting Access

<i>Enter your agency name and Originating Agency Identifier (ORI) below.</i>	
Agency Name	Agency ORI

Agencies Receiving Access

<i>Enter the agency names and Originating Agency Identifiers (ORIs) for the agencies you are granting access to add, modify, or request deletion of criminal history record data created by your agency and submitted to the BCA.</i>			
Agency #1 ORI	Agency #1 Name	Agency #2 ORI	Agency #2 Name
Agency #3 ORI	Agency #3 Name	Agency #4 ORI	Agency #4 Name
Agency #5 ORI	Agency #5 Name	Agency #6 ORI	Agency #6 Name
Agency #7 ORI	Agency #7 Name	Agency #8 ORI	Agency #8 Name
Agency #9 ORI	Agency #9 Name	Agency #10 ORI	Agency #10 Name

Authorization

Access shall be effective on the date below and shall remain in effect until rescinded by the authorizing agency or the BCA terminates access if an agency is found to be in violation of Criminal History Record Maintenance Policy.

Signature of Agency Head: _____ Date: _____

Printed Name of Agency Head: _____ Title: _____

Submit completed forms to the BCA Service Desk via email at BCA.ServiceDesk@state.mn.us.