

# Step 1- Option B

## Plymouth Police Department

**This option requires a visit (by appointment only) to the Plymouth Police Department. There you will meet PSU Officer Amanda Hutchins to complete the fingerprinting portion of the criminal record check (see hours below).**



[Click here](#) to book an appointment.

Choose a date and then a time slot. (They will turn green.)

### Holmes Center State Required Criminal Background Check

Teacher Candidate Criminal Record Check for NH ED

Your appointment will take place at Plymo... [Read more](#)

15 minutes

#### DATE

< > February 2023

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

#### TIME

9:00 AM	9:15 AM	9:30 AM
9:45 AM	10:00 AM	10:15 AM
10:30 AM	10:45 AM	1:00 PM
1:15 PM	1:30 PM	1:45 PM
2:00 PM	2:15 PM	2:30 PM

ⓘ All times are in (UTC-05:00) Eastern Time (US & Canada)

Add your details (name, email and phone number are required).

You will be taken to a confirmation screen and will receive an email as well.

NOTE: You must book at least 36 hours in advance of your appointment. You must give 36 hours' notice of a cancellation via Bookings. In the case of an emergency cancellation on the day of your appointment, call 603.535.2179 and leave a message.

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Make sure you have a **government issued ID and your PSU ID** with you at your appointment.

Arrive a few minutes early at the **Town of Plymouth PD (334 Main St)**.

Explain that you are there to meet PSU Officer Amanda Hutchins.

There will be a **LiveScan form** provided at the location, and the officer doing the printing will enter a tracking number on the form. **Take this form with you.**

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Fill out the Criminal History Record Check Release Form (CHRR), then get this form notarized (DO NOT SIGN the form until you are with a notary).

Make a check payable to: State of NH - Criminal Records.

**Mail the LiveScan form, the CHRR form (see last page), and a check for \$21.25** to the Department of Safety address at the top of the CHRR form.



If you have questions, please contact the Holmes Center.

You have completed **Step 1** of the Criminal Record Check.  
Please, go back to the [Instructions](#) page to go on to **Step 2**.



New Hampshire Department of Safety  
**DIVISION OF STATE POLICE**  
Central Repository for Criminal Records  
33 Hazen Drive, Concord, NH 03305

**CRIMINAL HISTORY RECORD RELEASE FORM**

**SCHOOL EMPLOYEE/VOLUNTEER CRIMINAL HISTORY RECORD CHECK – RSA 189:13-A**

I hereby authorize the New Hampshire Department of Safety, Division of State Police to notify the Superintendent/Chief Executive Officer of an employing school administrative unit, school district, chartered public school, public academy, or non-public school of the presence of any Felony and/or Misdemeanor Criminal History Record Conviction pursuant to RSA 189:13-a.

<p><b>CHRI RELEASED TO:</b>  Department of Education-Bureau of Credentialing  Name of SAU  Susan Blake or Kimberly Wilson  Superintendent/Chief Executive Officer  101 Pleasant Street  Address  Concord, NH 03301</p>	<p>SAU # _____</p> <p>Employee <input type="checkbox"/></p> <p>Volunteer <input type="checkbox"/></p> <p>Prepaid Account Number _____</p>
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**CHRI TO BE REQUESTED ON:**

Name: \_\_\_\_\_

LAST (MAIDEN) FIRST MI

Address: \_\_\_\_\_

STREET CITY STATE ZIP

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security # (optional): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

By signing below you are certifying that you are the individual listed above and that the information provided is true under penalty of forgery and/or unsworn falsification.

Releasee's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Notary's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(Affix seal)

**RECORD CHALLENGE**

SAF-C 5703.12 Procedure for Correcting a CHRI (a) Persons or their attorneys desiring access to their CHRI for the purpose of challenge or correction shall appear at the central repository. (b) A copy shall be provided to a person if after review he/she indicates he/she needs the copy to pursue the challenge. (c) Any person making a challenge shall identify that portion of his/her CHRI which he/she believes to be inaccurate or incorrect, and shall also give a correct version of his/her record with an explanation of the reason that he/she believes his/her version to be correct. (d) The director shall take the following actions within 30 days of receipt of challenge: (1) Review the records and contact the law enforcement agency or court which submitted the record to compare the information to determine whether the challenge is valid; (2) if the challenge is valid, which means there is a discrepancy between the information submitted and the information maintained by the law enforcement agency or court, the record shall be corrected and the person and appropriate CJAs shall be notified; and (3) if the challenge is invalid, the person shall be informed and advised of the right to appeal pursuant to RSA 641. (e) When a record has been corrected, the division shall notify all non-criminal justice agencies, to whom the data has been disseminated in the last year, of the correction. (f) The person shall be entitled to review the information that records the facts, dates, and results of each formal stage of the criminal justice process through which he passes, to ensure that all such steps are completely and accurately recorded.

**WARNING:** The Division of State Police is the Criminal Record Repository for the State of New Hampshire. The record you have received is based only on what has been reported to the Repository and may not be a complete Criminal History Record of the named individual.

Fees:  LIVESCAN - \$37.00 -or-  INKED - \$47.00 for Employees and \$20.75 for Volunteers  
NHSP LIVESCAN FEES: \$47.00 for Employees and \$30.75 for Volunteers

Applicant fingerprint card must be submitted at the same time as payment and this form.

Make checks payable to: State of NH – Criminal Records