

# ESPB POLICY MANUAL – PART 2

## ESPB Policy Manual – Part 2

# 2022

.... to provide the Education Standards and Practices Board and all authorized personnel with a basic understanding of their responsibilities to protect and safeguard confidential information...

## **Policy and Procedures for CHRI**

## Education Standards and Practices Board (ESPB)

### Policy and Procedures for CHRI (Criminal History Record Information).

#### **N.D.C.C. § 15.1-13-14. Criminal history record checks.**

Provides for the ESPB to require criminal history record checks on new applicants and current licensees for the purpose of re-entry licensure.

#### **N.D.C.C. § 15.1-13-20. Applicants licensed in other states.**

Provides for the ESPB to require criminal history record checks on applicants who hold a regular teaching license or certificate from another state.

**Purpose:** This policy is intended to provide the Education Standards and Practices Board and all authorized personnel with a basic understanding of their responsibilities to protect and safeguard the confidential information to which they have access as a result of their board positions.

**Access:** Amy Bigelow, acting as the NAC (Noncriminal Agency Contact), the assistant attorney general assigned to this board, ESPB staff, and ten board members are authorized to receive, evaluate, and discuss in executive session any questionable CHRI results as relating to the application for teacher. Only those authorized have access to CHRI. Those authorized are on an Authorized Personnel List filed at the NDBCI (North Dakota Bureau of Criminal Investigation) *Appendix A* which will be kept current with any changes in authorized personnel.

**Use:** **12-60-24 Criminal history record checks** explains the purpose, in this case, to deem suitability or fitness to be granted a North Dakota teaching license.

Use is restricted to the specific purpose of licensing.

**Handling:** When the application for an initial teaching license or re-entry license is received in the ESPB office, the NAC ensures the application has been authenticated via the Fingerprint Verification Form. Two finger print cards marked with the N.D.C.C. authority and purpose in a sealed envelope from the Fingerprint Technician will be sent by the applicant to the ESPB office, along with the completed BCI Criminal History Record Check Request form and ESPB Fingerprint Verification Form, and appropriate fees as noted on the ESPB Fingerprinting Instructions. *Appendix B* When these documents are returned to the ESPB office, the NAC will ensure all information is filled out properly and the fee is attached. The NAC will then send the fingerprint cards and forms to NDBCI via USPS.

When the results of the criminal history check are received from NDBCI in the ESPB office, (**12-60-24(2)**) the NAC or ESPB staff will review for any information or concerns that should be addressed. If none, the results will be logged in the application as "clear" and placed in a file in a locked drawer. The ESPB office has a shredder to destroy documents after three years.

CHRI results of concern will be hand delivered to a designated board member, who can bring any questions or concerns to the assistant attorney general serving as general counsel to the ESPB.

If the designated board member and/or assistant attorney general deem necessary, the results will be discussed in an executive session at the next full board meeting. If either one requests a board discussion, an agenda item is set for an executive session. If the board members need copies, they will be mailed through the USPS, however, it should be determined if the designated board member or the assistant attorney general can lead a discussion without copies being distributed.

CHRI is not public record and will not be released to any unauthorized persons.

Once the concerns/issues have been resolved, the criminal history check results, as well as any other documentation generated through the review and final determination, will be placed in a locked drawer for disposal at a later time.

**Prevention of Unauthorized Disclosure:** The NAC will have all documents in the ESPB office locked in a drawer at all times. CHRI will never be left unattended when not in the locked drawer. Any documents that need to be sent to another authorized person will be sent via USPS or hand delivered in an envelope marked *Confidential*.

Any Authorized Personnel that leaves the board for any reason will be removed from the Authorized Personnel List immediately, and will be unable to receive or review documents or engage in any discussions in executive session that involve CHRI. Should an authorized person violate the terms of confidentiality and unauthorized disclosure, that person will be removed from the authorized list immediately and will no longer have access to CHRI information or discussions or decision making.

Training: Authorized Personnel will have accounts on CJIS (Criminal Justice Information Services) online for the purpose of training, including the local agency admin account for the NAC. Once authorized personnel have completed the training and received the certificate, copies of the certificate will be placed in the CHRI file, as well as an Excel spreadsheet generated by the local agency admin site, and a Noncriminal Justice Agency Training Documentation Form. **Appendix C** The authorized personnel will receive notices via email when the next training is due. When an authorized person leaves the board, that account on CJIS Online will be immediately deleted.

Training will consist of the online Security Awareness Training, as well as authorized personnel becoming familiar with the policies and procedures to prevent unauthorized disclosure. Authorized personnel will engage in a conversation regarding certain points in the online training, such as social engineering, and other situations that require awareness. Authorized personnel will be given a copy of the ESPB Policies and Procedures Manual, and an Acknowledgment Statement of Misuse. **Appendix D**

Abuse or Misuse of CHRI: Examples of suspected abuse include, but are not limited to, using CHRI for any purpose other than intended and authorized, sharing CHRI with unauthorized personnel, sending a fax to an unauthorized person or sending a fax without the proper ORI on both ends. In the event shredding and/or burning materials isn't feasible, failing to sanitize any media or failure to overwrite media can be suspected misuse and result in the loss of authorization and access to records. Failure to prevent unauthorized persons from entering a secure perimeter or failure to escort persons into secure perimeters may be grounds for investigating and reporting. Safeguards will be taken against shoulder surfing.

Although this Board will not be transmitting any CHRI via email and will not be storing any CHRI by electronic means at this time, this board will be aware of technical safeguards over digital or electronic storage, use of encryption or passwords, and social engineering concerns.

Suspected misuse will be investigated and reported, and could result in an authorized person being removed from the Authorized Personnel list and any access to CHRI. Suspected unauthorized use or misuse of CHRI could result in termination of employment or prosecution. This is recorded and reported on the Security Incidence Response Form. **Appendix D**

**Communication:** Communication may take place between the board member designated to initially view CHRI and the assigned assistant attorney general, if needed. Full board participation will take place at a board meeting under an executive session.

The board and authorized personnel will communicate with the applicant should any further information or explanations be requested during the executive session. The NAC will verify the identity of the applicant prior to communicating in any form. Each CHRI result that requires any action will have a secondary dissemination log **Appendix E** generated showing all communication and all forms of communication between authorized personnel and between authorized personnel and the applicant.

Authenticating recipients of the disseminated information would include a call or email with the expected date and method of delivery, and a follow up call or email to ensure the material reached the intended authorized person.

The ESPB will refer to the NDBCI Noncriminal Justice Agency Guide (<https://attorneygeneral.nd.gov/public-safety/criminal-history-records/noncriminal-justice-agency-guide>) and the FBI CJIS Security Policy (<https://www.fbi.gov/services/cjis/cjis-security-policy-resource-center/view>) for additional information and forms.

# Appendices

## Appendix A

Authorized Personnel List

## Appendix B

Fingerprint packet

- Instructions
- Example Fingerprint card
- Criminal History Records Check Request
- Fingerprint Verification Form

## Appendix C

Noncriminal Justice Agency Training Documentation Form

## Appendix D

Acknowledgment Statement of Misuse  
Security Incident Reporting Form

## Appendix E

Communication/Secondary Dissemination Log

## Appendix A

May 19, 2022

ND Bureau of Criminal Investigation  
Criminal Records Audit Unit  
PO Box 1054  
Bismarck, ND 58502

Dear Auditor:

The following is an updated authorized personnel list for the Education Standards and Practices Board.

<u>Authorized Individual</u>	<u>Title</u>	
Carly Retterath	Board Chair	
Andrea Fox	Board Member	
Benjamin Johnson	Board Member	
Brenda Tufte	Board Member	
Patti Stedman	Board Member	
Cory Steiner	Board Member	
Joshua Standing Elk	Board Member	
Siri Coleman	Board Member	
Sonya Hansana	Board Member	
Kathy Lentz	Board Member	
Kirsten Baesler	Ex-Officio Board Member	
Dr. Becky Pitkin	Executive Director	(Employee)
Mari Riehl	Assistant Director	(Employee)
Amy Bigelow	Licensing Specialist/ Secretary	(Employee)
Lacey Hinsz	Accounting/Data Specialist	(Employee)
Virginia Beggs	Office Communication Specialist	(Employee)
Carl Karpinski	Assistant Attorney General	

If you have any questions, you can reach me at 701-328-9643.

Sincerely,

Amy Bigelow  
Licensure Specialist



### Education Standards and Practices Board

2718 Gateway Avenue, Suite 204  
Bismarck, ND 58503-0585  
(701) 328-9641  
(701) 328-9647 fax  
<http://www.nd.gov/esp>

### Fingerprinting Instructions and Forms

(September 2019)

The fingerprinting process can be conducted at a sheriff's office, a police department, by campus police, or by an agency authorized to take fingerprints. **Two** cards must be completed with a ten-finger check and should not be folded, bent, or altered in any way. If your fingerprinting is processed and transmitted electronically by a law enforcement center in North Dakota, you will only receive one fingerprint card and a Fingerprint Acknowledgement Form from the fingerprint agent.

**Every space on the top section of the fingerprint cards must be completed, as indicated on the attached example card.** The fingerprinting agency may request the **ORI**, which is **ND920110Z**, and **Reason Fingerprinted**, which is **Teacher Licensure in accordance with NDCC 15.1-13-14**.

Collect the following items and take them with you when you get fingerprinted:

- Envelope large enough to mail 2 8x8 inch fingerprint cards
- Money order for \$44.50 made out to ESPB
- Fingerprint forms from the ESPB Fingerprinting Instructions and Forms

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**After you have been fingerprinted, submit the following in a sealed envelope signed by the fingerprint technician to the North Dakota Education Standards and Practices Board at 2718 Gateway Ave, Suite 204, Bismarck ND 58503:**

- **2 completed fingerprint cards -OR-, if your fingerprints were completed and transmitted electronically by a North Dakota law enforcement center, 1 fingerprint card and Fingerprint Acknowledgement Form**
- **ESPB Fingerprint Verification form**
  - **Applicant must complete Part 1**
  - **Fingerprint Technician must complete Part 2**
- **Criminal History Record Check Request Form**
  - **Complete the last section titled "To Be Completed by Subject of Record Check"**
  - **Sign and date the form**
- **Money order for \$44.50 made out to ESPB**

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You will receive an email from [espbnndteach@nd.gov](mailto:espbnndteach@nd.gov) once your background check has been completed.

**\*\* Please keep the confirmation email for your records, since it will be the only confirmation you will receive regarding the results of your background check. \*\***

The BCI and FBI check may take six weeks or more for processing. Please allow sufficient time for the fingerprint check and completion of the licensure process before beginning any teaching position. North Dakota law requires a current valid North Dakota teaching license for employment.

Never go into a classroom to teach without a valid North Dakota license. There is a \$50 a day fine, which you are responsible to pay, if you are employed as an educator without a license.

**Fingerprinting requirement in accordance with NDCC 15.1-13-14.** ESPB does not advocate, permit nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.

<b>APPLICANT</b> <small>See Privacy Act Notice on Back</small>		LEAVE BLANK		TYPE OR PRINT ALL INFORMATION IN BLACK			FBI		LEAVE BLANK		
FD-256 (REV. 3-1-10) 11100046		SIGNATURE OF PERSON FINGERPRINTED *		LAST NAME NAM *		FIRST NAME *		MIDDLE NAME *			
RESIDENCE OF PERSON FINGERPRINTED *		ALIASES - AKA *		CITIZENSHIP CTZ *		SEX *		RACE *		DATE OF BIRTH DCB Month Day Year *	
DATE *		SIGNATURE OF OFFICIAL TAKING FINGERPRINTS *		YOUR NO. OCA *		HT *		WGT *		EYES *	
EMPLOYER AND ADDRESS		FBI NO. FBI		ARMED FORCES NO. MNU		HAIR *		PLACE OF BIRTH POB *			
REASON FINGERPRINTED <b>Teacher Licensure in accordance with NDCC 15.1-13-14</b>		SOCIAL SECURITY NO. SOC		MISCELLANEOUS NO. MNU		CLASS _____		REF. _____			
1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		5. R. LITTLE			
6. L. THUMB		7. L. INDEX		8. L. MIDDLE		9. L. RING		10. L. LITTLE			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY				L. THUMB		R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY			

**EXAMPLE**

Codes for Demographic Information:

Race

- A – Asian/Pacific Islander
- B – Black/African American
- I – American Indian or Alaskan Native
- W – White or Hispanic
- U – Unknown

Eye and Hair Color

- BLD – Bald
- BLK – Black
- BLN – Blonde or Strawberry
- BLU – Blue
- BRO – Brown
- GRY – Gray
- GRN – Green
- HAZ – Hazel

- MAR - Maroon
- MUL – Multi-colored
- ONG – Orange
- PLE – Purple
- PNK – Pink
- RED – Red
- SDY – Sandy
- WHI – White





## ESPB Fingerprint Verification Form

### Part 1 – To be completed by applicant

Please Print Legibly

Last Name	First Name	Middle Name
Maiden/Former Last Names		Social Security Number
Mailing Address		Email Address – REQUIRED FOR TIMELY PROCESSING
City	State	Zip Code
Home/Cell Phone Number	Work Phone Number	Date of Birth

Pursuant to NDCC 12-60-16.8, I hereby authorize the North Dakota Bureau of Criminal Investigation to release a copy of my criminal record to the North Dakota Education Standards and Practices Board (ESPB), and I give ESPB permission to check for my name on the North Dakota Child Abuse and Neglect Index, as a prerequisite for teacher licensure.

Fingerprints submitted will be used to check the criminal history records of the FBI and the North Dakota BCI.

\_\_\_\_\_

Date

Signature of Applicant

### Part 2 – To be completed by fingerprint technician

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints. If the individual is being printed via livescan, please do NOT fill out card prior to being fingerprinted.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. Please print clearly.
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant. *Do not give the applicant the card without first sealing it inside the envelope.*

Date:	Name of Applicant:
Name of Fingerprint Technician (print):	
Fingerprint Technician's Agency/Company Name:	
Type of Photo ID Provided (check one): <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (please specify)	

#### For ESPB Use Only

ND BCI Report Received \_\_\_\_\_ Clear / Hit

FBI Report Received \_\_\_\_\_ Clear / Hit

NASDTEC Clearinghouse \_\_\_\_\_



**CRIMINAL HISTORY RECORD CHECK REQUEST  
PURSUANT TO NDCC 12-60-24**  
OFFICE OF ATTORNEY GENERAL  
BUREAU OF CRIMINAL INVESTIGATION  
SFN 60688 (09-2019)

FOR BCI USE ONLY
Check Number
Amount
Receipt Number
Receipt Date
SID

**INSTRUCTIONS**

1. Please type or print legibly and ensure that all information is complete. **Incomplete or illegible requests will be returned.**
2. If requesting Federal Bureau of Investigation (FBI) check, attach two (2) completed fingerprint cards containing the fingerprints of the subject of the record check and remit appropriate fees.

**TO BE COMPLETED BY AGENCY**

Mail to Attention of Amy Bigelow	Telephone Number (701) 328-9641	
Agency Name Education Standards and Practices Board	Originating Agency Identifier (ORI) ND920110Z	
Address 2718 Gateway Avenue, Suite 204	Email Address espbinfo@nd.gov	
City Bismarck	State ND	ZIP Code 58503
Comments/Miscellaneous		

**AGENCY USE ONLY**

Please Check One and Remit Appropriate Fees

**Record Checks for Employees/Others**

- ND only, remit \$15.00
- FBI only, remit \$26.25
- ND and FBI, remit \$41.25

**Record Checks for Volunteers**

- ND only, remit \$15.00
- FBI only, remit \$24.25
- ND and FBI, remit \$39.25

Process Control Number (PCN)
------------------------------

**TO BE COMPLETED BY SUBJECT OF RECORD CHECK**

Last Name	First Name (no initials)	Middle Name
Last Name(s) (AKA/Maiden/Former)	First Name	Middle Name
Date of Birth	Social Security Number	
Current Address		
City	State	ZIP Code

Your fingerprints will be used to check the criminal history records of the FBI in accordance with Title 28 CFR 50.12. You have the opportunity to review or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28 CFR 16.34.

I understand the Applicant Rights provided on the following page and hereby authorize the North Dakota Bureau of Criminal Investigation to release my state and FBI criminal history records to the requester listed above.

A photocopy of this signed release shall have the same force and effect as the original release.

Signature	Date
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Your social security number is requested to permit the North Dakota Bureau of Criminal Investigation to conduct a criminal history record check under N.D.C.C. § 12-60-16.6. Disclosure of your social security number is voluntary, however, if you choose not to disclose it, you will be required to provide alternative information or documentation, which may delay the criminal history record check.

## APPLICANT RIGHTS

**APPLICANT: Please review and retain for your records.**

### Privacy Act Statement

As of 03/30/2018

This privacy act statement is located on the back of the FD-258 fingerprint card.

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

### 28 CFR 50.12(b)

Officials at the governmental institutions and other entities authorized to submit fingerprints and receive FBI identification records under this authority must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. The officials making the determination of suitability for licensing or employment shall provide the applicants the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. These officials should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record, or has declined to do so. Those officials making such determinations must advise the applicants that procedures for obtaining a change, correcting, or updating of an FBI identification record are set forth in 28 CFR 16.34. A statement incorporating these use-and-challenge requirements will be placed on all records disseminated under this program. This policy is intended to ensure that all relevant criminal record information is made available to provide for the public safety and further, to protect the interests of the prospective employee/ licensee who may be affected by the information or lack of information in an identification record.

## NONCRIMINAL JUSTICE AGENCY TRAINING DOCUMENTATION FORM

AGENCY NAME: \_\_\_\_\_ AGENCY ORI: \_\_\_\_\_

**The following training is REQUIRED:**

Standard Security & Awareness Training (CJIS Online)

This training must be completed within six (6) months of hire or appointment to position with access to criminal history record information (CHRI). It must be repeated every two (2) years for as long as the individual is on the agency Authorized Personnel List and granted access to CHRI.

Agency Internal Privacy and Security Training

Any personnel placed on the agency authorized Personnel List should receive internal agency training on the agency's security and handling processes prior to being allowed access to CHRI. Refresher training shall be completed every two (2) years.

Name:	First Time (F) or Refresher Training (R)?	Date of Standard Security & Awareness Training (CJIS online)	Date of Agency Privacy & Security Training	Acknowledgement Statement Signed? (Y/N)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

The persons named above have received the required training in accordance with applicable rules and regulations.

NAC Printed Name: \_\_\_\_\_ **Please print legibly** NAC Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Keep training logs on file. Training logs will be reviewed during audits. The NDBCJ will also periodically request the agency submit the training logs as part of quality assurance and compliance review. Please do not send training logs to NDBCJ unless requested.

### Acknowledgment Statement of Misuse

All authorized personnel are made aware of the guidelines, consequences and liabilities that could occur from unauthorized use of criminal justice information (CJI) and criminal history record information (CHRI). Employees are advised of the following:

- Do not give CHRI to someone who is not authorized to receive it.
- Do not allow unauthorized access to CHRI.
- Do not use CHRI for any other purpose other than stated in the North Dakota statute.
- Access to criminal justice information (CJI) and CHRI via submitted fingerprints could be suspended or cancelled for violation of security and/or violation of the terms and conditions in the User Agreement.
- Misuse of the CHRI is a misdemeanor or felony depending on the circumstances of the release.

#### Penalties for misuse of CHRI

- N.D.C.C. § 12.1-13-01
- N.D.C.C. § 12-60-16.10
- Title 28, USC § 534
- Pub. L. 92-544
- Title 28, CFR, 20.33(b)

I acknowledge that I have been advised of the consequences of misuse of criminal justice and criminal history record information.

\_\_\_\_\_  
Employee Name (print)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date



**Security Incident Response Form  
FBI CJIS DIVISION  
INFORMATION SECURITY OFFICER (ISO)  
SECURITY INCIDENT REPORTING FORM**

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NAME OF PERSON REPORTING THE INCIDENT: \_\_\_\_\_

DATE OF REPORT: \_\_\_\_\_ (mm/dd/yyyy)

DATE OF INCIDENT: \_\_\_\_\_ (mm/dd/yyyy)

POINT(S) OF CONTACT: \_\_\_\_\_

PHONE/EXT: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

LOCATION(S) OF INCIDENT: \_\_\_\_\_

INCIDENT DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

SYSTEM(S) AFFECTED: \_\_\_\_\_

\_\_\_\_\_

AFFECTED SYSTEM(S) DESCRIPTION (e.g. CAD, RMS, file server, etc.): \_\_\_\_\_

\_\_\_\_\_

METHOD OF DETECTION: \_\_\_\_\_

ACTIONS TAKEN/RESOLUTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The Following is for BCI Use Only**

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Copies To:

George White  
(FBI CJIS Division ISO)  
1000 Custer Hollow Road  
Clarksburg, WV 26306-0102  
(304) 625-5849  
[iso@ic.fbi.gov](mailto:iso@ic.fbi.gov)

John C. Weatherly  
(FBI CJIS CSIRC POC)  
1000 Custer Hollow Road/Module D-2  
Clarksburg, WV 26306-0102  
(304) 625-3660  
[iso@ic.fbi.gov](mailto:iso@ic.fbi.gov)

Criminal History Secondary Dissemination Log

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

Agency ORI \_\_\_\_\_

Page \_\_\_\_\_

Date	Subject's Name	Subject Identification	Agency Personnel that shared CHRI	Purpose for which information is being requested

The Secondary Dissemination Log must be kept for a minimum of three (3) years.