

## **BACKGROUND INVESTIGATION CHECK (BIC) FORM**

Section I—Applicant's Full Legal Name (Required/Please Print)			Date of Birth (I	Required)	EDUID (Optio	EDUID (Optional)	
Applicant's Street Address (Required)			Applicant City, State, and Zip		Phone Number	Phone Number (Required)	
			pp in the opposite p		r none ramber (nequired)		
Section II—Recent BIC/Fingerprinting							
Indicate below if you have had a prior BIC completed through the SDE within the last six months.							
YES, I <u>have</u> completed a prior than this one) within the I	NO, I have not completed a prior BIC through the SDE within the last six (6) months.						
Approximate Date of BIC (MM/YY)	Submit a completed fingerprint packet:						
BIC Completed For: ☐ Certification	☐ Fingerprint Card						
Complete the rest of this form and	☐ Instructions for Handling Fingerprint Cards Form						
bicforms@sde.idaho.gov.	$\square$ BIC Form (this form)						
No other forms or fees are needed.			☐ Background Investigation Check Fee				
Section III—Reason for BIC/Fingerprinting Select all that are applicable.							
□Idaho Educator Certification - If not employed yet, Section IV is not required.							
☐ Student Teaching at any University/College (Section IV must be signed by College/University):							
☐ Boise State University ☐ Brigham Young University-Idaho ☐ College of Idaho ☐ Idaho State University							
□Lewis-Clark State College □ N	orthwest N	azarene University	$\prime\Box$ University of I	daho 🗆 Out of Stat	e University		
For each of the reasons selected be		responding Distric	t/Charter signatu	<u>ire must be</u> <u>presen</u>	t in Section IV.		
Employment with a District or Charter							
□ Substitute Teacher (Only the District or Charter placing the individual on the substitute teacher list must sign below)							
Statewide Contractor List (Only the District or Charter placing the individual on the contractor list must sign below)							
Contractor within a single district (Please specify:)							
□Volunteer with a District or Charter - If you will be volunteering with a District or Charter, please complete Section IV below.							
Please note that should a volunteer become employed by a District or Charter, a new BIC will be required for the reason of							
employment, regardless of when the volunteer BIC was completed.							
☐ Removal from Substitute Teacher List ☐ Removal from Statewide Contractor List							
Section IV—Employment Verificati	ion						
List <u>ALL</u> Districts/Charters you will be		d hy ar valunteerir	na for at the time	of form completion	Fach District/Cl	harter must	
sign and date in the appropriate sp		•					
previous Districts/Charters.							
Note: For substitute teachers, only	the District	or Charter placing	the individual or	the substitute tead	cher list must sig	n below.	
District/Charter/ Contract	District/Charter/ Contractor Pri		esignee	Signature of Des	ignee	Date	
Name	Number						
I.							
Applicant Signature: Date:							
Idaho Department of Education				Office: (208	3) 332-6800		
PO Box 83720 Boise ID 83720-002	7			Fax: (208) 3			

www.sde.idaho.gov/cert-psc/bic/

Speech/Hearing Impaired: (800) 377-3529