



# STATE OF OHIO

Office of the Attorney General

**Request for Exemption from Electronic  
Fingerprint Submission Requirement**

**Ohio Attorney General's Office**

Bureau of Criminal Identification and Investigation  
P.O. Box 365  
London, Ohio 43140

**Instructions:** Please type or print clearly all information. Illegible or incomplete information may result in processing delays or denial of your request. Mail this form, together with your fingerprint card(s), to the above address.

**APPLICANT'S NAME:**

LAST

FIRST

M.I.

**APPLICANT'S HOME ADDRESS:**

Street

City

County

State

Zip

**EMPLOYER or LICENSING AGENCY:**

**BASIS FOR EXEMPTION:**

1. No regional access (>75 miles) to electronic fingerprinting services:

Nearest electronic fingerprint site: (Refer to public sites listed on the Attorney General's website at <http://www.webcheck.ag.state.oh.us/webcheckcommunity.htm>)

Business Name

Address

2. Other (see information sheet): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I request an exemption from the mandatory electronic fingerprint submission requirement.  
I certify that the information I have provided on this request is true and correct.

Applicant's Signature

Date

The Ohio Attorney General's Office, Bureau of Criminal Identification and Investigation will evaluate your request and determine if adequate justification exists to accept your hard fingerprint card(s) in order to process this request for criminal background check information for employment, licensing, certification, child placement or adoption purposes.