

ADMINISTRATIVE OFFICE OF THE COURTS  
RECORDS UNIT  
1001 VANDALAY DRIVE  
FRANKFORT, KENTUCKY 40601  
502-573-1682 or 800-928-6381  
records@kycourts.net



Driver's License # \_\_\_\_\_ Student's Name: \_\_\_\_\_

A current background check is required to be on file for ALL parents/volunteers. There is a fee charged by the state and a new request must be completed each calendar year (every 12 months). The process to obtain a background check is as follows:

1. To be processed at Goodridge, \$10 cash, check or money order payable to Goodridge Elementary School MUST accompany this form.  
OR
2. To be processed at the Administrative Court office in Frankfort, a \$20 check or money order (NO cash) payable to Kentucky State Treasurer, can be mailed to the above address.  
OR
3. To process online (payable by credit card for \$20 plus a nominal online processing fee), please visit the following website:  
courts.ky.gov
  - click on public
  - click on "criminal record report"
  - click on "registered login user" (Be sure to select option to receive your results via e-mail).

Fees are paid to the order of the KENTUCKY STATE TREASURER by check or money order ONLY. FAILURE TO COMPLY WITH THESE PROCEDURES WILL RESULT IN THE REQUEST BEING RETURNED UNPROCESSED. If you suspect information contained on the record is incorrect, or have any questions, please contact the Records Unit at (502) 573-1682 or (800) 928-6381.

PLEASE PRINT OR TYPE THE INDIVIDUAL'S INFORMATION CLEARLY.

SOCIAL SECURITY NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

MAIDEN NAME(S) AND/OR ALIAS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

STREET ADDRESS / P.O. BOX: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

I understand the information supplied by me must be truthful and falsification with an intent to mislead may result in my prosecution under KRS 523.100. I have provided the basic information necessary to qualify for record processing and exemption of fees - if applicable.

\* ALL INFORMATION BELOW IS REQUIRED.

Individual's Signature  
Goodridge Elementary School  
Company  
Kim Walls, School Clerk  
Requestor/Contact Person  
3330 Cougar Path  
Address  
Hebron, KY 41048  
City, State, Zip

Date  
kim.walls@boone.kyschools.us  
E-mail address  
858-334-4420  
Telephone Number

Please denote which purpose applies to this request:

- Employment
- Criminal Investigation
- Screening Housing Applicants
- Volunteer/Care over Juvenile
- Licensing
- Other (please explain) \_\_\_\_\_