



# Hawaii Civil Rap Back Service

## Subscribing Entity Startup Checklist

This form shall be completed for Agencies/Organizations requesting to participate in the Hawaii Rap Back Services.

### ***Agency/Subscribing Entity Information:***

Agency/Subscribing Entity:

Agency/Subscribing Entity \_\_\_\_\_

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

\_\_\_\_\_

Agency/Subscribing Entity ORI: \_\_\_\_\_

\_\_\_\_\_

### ***Contact Information:***

Executive Contact: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

\_\_\_\_\_

Operational Contact

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

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

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

Phone: \_\_\_\_\_

\_\_\_\_\_

Technical Contact

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

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

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

Phone: \_\_\_\_\_

\_\_\_\_\_

**Participation Requirements:**

A. Prior to being fingerprinted for the initial criminal history record check, each applicant must provide the appropriate consent and be given the appropriate notifications, as required by §846-2.7(d), HRS, and federal regulations. This includes written or electronic acknowledgement that the applicant has been provided with the FBI Privacy Act Statement.

B. Rap Back subscriptions may only be created if the entity has a continuing authority to receive criminal history record information on the individual. In other words, the individual must be actively volunteering with or employed, licensed, or permitted by the agency. The subscription may only be created after the individual has successfully passed initial fitness determination.

C. All subscriptions must be validated every five years to ensure the agency is still authorized to receive criminal history record information on the subscribed individual. Subscriptions are automatically set to expire on the fifth anniversary of the subscription creation date.

D. FBI policy dictates the subscriptions must be cancelled within five business days from the final determination of the agency's ineligibility to subscribe to the individual.

E. Any information received from the Rap Back Service is considered "criminal justice information" and subject to FBI CJIS Security Policy and the HCJDC Criminal History Record Check for Non-Criminal Justice Purposes Policy.

F. The Entity must maintain all necessary documents and written policies required to comply with State and FBI Security Audits.

**Subscribing Entity Plan:**

\_\_\_\_\_ is requesting to participate in the Hawaii Rap Back Service.  
(Entity Name) Below are the details of the entity's policies, procedures and plan.

1. Does your agency currently have an existing authority to receive Fingerprint-Based Criminal History Record Information (CHRI)?  Yes  No

2. The Rap Back Service is accessed through the Applicant Rap Back Application (ARBA) in the HIJIS Portal. Does your agency currently have access to HIJIS/ARBA to receive the initial criminal history record check results?  Yes  No

*(If "NO", for non-criminal justice agencies, please submit the **CJI Access Request** request form for each staff member requiring access. For criminal justice or law-enforcement agencies, please submit the **HIJIS New User Attribute Definition** form for each staff member requiring access.)*

3. Prior to being fingerprinted, do all applicants consent to being notified that their fingerprints will be retained in the national file for all purposes and uses authorized for fingerprint submissions, which includes the Rap Back Service?  Yes  No

(If "NO", or "N/A", skip to Question 4.)

A. Does the consent and acknowledgement include a copy of the FBI Privacy Act statement?  Yes  No

B. Is the consent and acknowledgement stored and accessible for each individual applicant and available for review upon request?  Yes  No

C. How is the consent and acknowledgement provided to the applicant?  Written  Electronic

D. Please provide a diagram or workflow of your agency's application and fingerprint submission process.

E. Please provide copies of the consent and acknowledgement forms used by your agency.

4. What population of applicants do you plan to enroll? (Check all that apply)

EMPLOYEES  FIREARM APPLICANTS  LICENSE

If License, please list type: \_\_\_\_\_

VOLUNTEERS  OTHER

If Other, please list type: \_\_\_\_\_

5. Provide a copy of your agency's internal procedures on how subscriptions will be managed and maintained.

6. Retained Fingerprints (since December 4, 2016) - How does your agency plan to handle fingerprints collected and stored prior to implementation of the Rap Back Service?

\_\_\_\_\_  
\_\_\_\_\_

7. Legacy Applicants - Applicants fingerprinted prior to December 4, 2016 will need to be re-fingerprinted in order to enroll these individuals in the Rap Back Service. The resubmission of Legacy Applicant fingerprints will incur applicable state and FBI Fees.

Does your Agency plan to resubmit fingerprints for Legacy Applicants?  Yes  No

If so, please provide an estimated count of the number of Legacy Applicants and the timeline for fingerprint resubmission. Estimated Count: \_\_\_\_\_

8. All Rap Back notifications will be sent via email. Email notification must be preconfigured. A distribution/group list is recommended if multiple individuals within your agency need to receive the notifications; this will allow agency personnel to manage who receives the notifications. Rap Back notifications will be sent to the following email address(es):

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

I understand that it is my responsibility to ensure all \_\_\_\_\_  
(Entity Name)

personnel know and comply with the applicable policies and procedures. Failure to comply with the applicable policies may result in discontinuation of services.

Operational Contact Signature Date

Executive/Administrative Signature Date

**APPROVED:**

HCJDC CSS Supervisor Signature Date

HCJDC Administrator Signature Date