



Evaluation of Criminal Charges/Conviction(s)

Occupational Licensing & Registration Division

Only individuals enrolled or planning to enroll in training to obtain **an initial license** who believe they may be **ineligible for the license due to a conviction or deferred adjudication** are eligible to request an evaluation.

Note: To complete this form, you must first save this document to your computer. Attach additional pages as necessary.

Section I: Basic Information

All fields are required

Type of License Requested	Last Name	First Name	Middle Name	Suffix
Last 4 of SSN	Email Address	Date of Birth	Maiden/Other Names	
Mailing Address		Home Phone	Work Phone	

Please check one of the following boxes:

I have been arrested or received a criminal conviction and have attached a Texas DPS report or court documents attesting to the criminal history.

I have been arrested or received a criminal conviction and my history is listed in Sections II and III.

Section II: Conviction Information*

List all in-state and out-of-state convictions, including deferred or dismissed cases, above a Class C Misdemeanor regardless of age.

Date Convicted (Required)	Offense(s) Convicted Of (Required)			
Docket Number (if known)		Trial Date (if known)		
Court Where Convicted (if known)		Court Mailing Address (if known)		
City (Required)	State	County	ZIP	Phone Number

Section III: Arrest Information*

List all in-state and out-of-state arrests, regardless of age.

Date Arrested or Charged (Required)	County and/or Court where Charges are Pending (Required)			
Offense(s) Charged With (Indicate felony or misdemeanor and class)				
Docket Number (if known)		Trial Date (if known)		
Name of Arresting Agency (if known)		Arresting Agency Mailing Address (if known)		
City (Required)	County	ZIP	Phone Number	

*See Instructions on Page 3

I affirm that the above information is true and correct. I understand that fraudulent or falsified information could result in the denial of this application pursuant to Title 30, Texas Administrative Code, Section 30.33, or the revocation of my license pursuant to Tex. Water Code, Section 7.303.

Typing your name on the signature line below constitutes an electronic signature and is legally equivalent to your written signature.

Signature	Date
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DPS Computerized Criminal History (CCH) Verification Form

Applicant Name (Print):

I acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. Authority for this agency to access an individual's criminal history data may be found in Texas Government Code, Chapter 411, Subchapter F <https://statutes.capitol.texas.gov/>.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is **not** allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint process, I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online [Crime Records General Information | Department of Public Safety \(texas.gov\)](#) Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-467- 2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me. **Acknowledge by signing below.**

Applicant Signature:

Date:

Section 2: Agency use only. Must be completed by authorized personnel conducting search.

Agency Name: Texas Commission on Environmental Quality

Authorized User:

Signature of Authorized User:

Date of Name-Based CCH Search:

Section 3: Agency use only. CHRI Name Based Tracking information. Check all that apply.

Purpose for CHRI Search.	<input type="checkbox"/> Applicant <input type="checkbox"/> Volunteer <input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Other: Determine eligibility
Is any part of CHRI stored by agency?	Reminder: DPS does not recommend storing any part of CHRI. <input type="checkbox"/> NO, CHRI is not stored by agency. <input checked="" type="checkbox"/> YES, CHRI is stored by agency.
CHRI Retention Period	<input checked="" type="checkbox"/> Temporarily Only <input type="checkbox"/> Annual <input type="checkbox"/> None Stored/Saved <input type="checkbox"/> Other:
CHRI Storage Method	<input type="checkbox"/> Physical/Printed (paper copy) <input checked="" type="checkbox"/> Digital/Electronic (saved anywhere on device/computer)
CHRI Retention Purpose	Explain: Temporary storage only if ERC is required
Date CHRI Destroyed	
Destruction Method	Explain:

Evaluation of Criminal Charges/Conviction(s) Instructions

Section I: Basic Information

Type of License Requested – TCEQ License program for which you want to apply:

www.tceq.texas.gov/licensing/licenses/requirements

Last Name/First Name – As it appears on your government-issued ID

Middle Name – As it appears on your government-issued ID

Suffix – Jr., Sr., III, etc., as it appears on your government-issued ID

Last 4 of SSN – Last four digits of your social security number

Email Address – Email address at which we can contact you

Date of Birth – MM/DD/YYYY (Ex: 04/01/1978), as it appears on your government-issued ID

Maiden or Other Names – Maiden or other assumed names

Mailing Address/Home Phone/Work Phone – the mailing address and phone numbers where you would like to receive notifications

Section II: Conviction Information

Date Convicted – Date of guilty verdict (MM/DD/YYYY)

Offense(s) Convicted Of – List all in-state and out-of-state convictions, dismissals, and deferred cases. Include the class and level of charge – for example, First Degree Felony or Class C Misdemeanor.

Docket Number – The docket number of your court proceedings

Trial Date – The date of your trial (MM/DD/YYYY)

Court Where Convicted – The name of the court where you were convicted (Ex: Travis County Court #3)

Court Mailing Address/City/State/ZIP/Phone Number – The mailing address and phone number of the court where you were convicted

Section III: Arrest Information

Date Arrested or Charged – Date of arrest or court appearance (MM/DD/YYYY)

County and/or Court Where Charges are Pending – The name of the county or court where charges are pending (Ex: Travis County or Travis County Court #3)

Offense(s) Charged With (indicate felony or misdemeanor and class) – List all offenses you have been charged with here, including the class and level of charge (Ex: "Class A Felony" or "Class C Misdemeanor")

Docket Number – The docket number of your court proceedings

Trial Date – The date of your trial (MM/DD/YYYY)

Name of Arresting Agency – The name of the law enforcement agency that arrested you

Arresting Agency Mailing Address/City/State/ZIP/Phone Number – The mailing address and phone number of the agency that arrested you

*** If you cannot recall arrest(s) or conviction(s), you may go to one of the following websites and purchase a report to submit along with this signed form:**

- To locate the websites for courts in Texas: card.txcourts.gov/DirectorySearch.aspx
- Texas Department of Public Safety Public Criminal History Search: publicsite.dps.texas.gov/ConvictionNameSearch/

Contact Information:

Mailing Address:

Occupational Licensing Section, MC-178
P.O. Box 13087
Austin, TX 78711-3087

Phone: (512) 239-6133

Email: licenses@tceq.texas.gov

Webpage: www.tceq.texas.gov/licensing

Please submit this form to licenses@tceq.texas.gov or the mailing address above.