

## Preliminary Application CONVICTION REVIEW

### **INFORMATION**

If you have a criminal conviction(s), you may submit an application, to determine if your criminal conviction(s) would disqualify you from obtaining a license. The fee is \$100 for each license type you are requesting review.

This application may be submitted at any time, including prior to obtaining the required education.

With this application, you may include additional information about your current circumstances, including the time since the offense, completion of the criminal sentence, evidence of rehabilitation, testimonials, employment history, and employment goals.

To submit an application, review the following steps.

#### **STEP 1: Get copies of the following**

- You must submit the following Conviction Information:**
1. A copy of the court record for each conviction (if they occurred in a State other than Nebraska);
  2. Your explanation of the events leading to each of the convictions (what, when, where, why) and a summary of actions you have taken to address the behaviors/actions related to the convictions;
  3. If currently on probation, a letter from your probation officer addressing the terms and current status of your probation.

#### **NOTE:**

**If you had an alcohol and drug evaluation and/or completed treatment**, to assist the Board and Department in review of any drug and/or alcohol conviction(s), the treatment provider must submit all evaluations/discharge summaries directly to the Department.

#### **STEP 2: Complete the Application**

- You must complete **ALL SECTIONS** of the application, pages 1-2.

#### **STEP 3: Submit your Application, Documents, and Fee to the Licensure Unit**

You must submit:

1.  A completed application
2.  Copies of all documents requested
3.  The fee of \$100 for each application per license type.

**Pay by check/money order (your cancelled check is your proof of receipt); debit or credit card is not accepted.**

### **REVIEW PROCESS:**

Upon receipt of a completed application, the appropriate board will decide if your criminal conviction would disqualify you from obtaining a license. The board will issue its decision in writing within 90 day after receiving an application. If the board decides that your criminal conviction would disqualify you from getting a license, the board may choose to instruct you of any action that you may take to fix the disqualification. If the board finds that you have been convicted of another criminal conviction, the board may rescind their original decision if additional criminal conviction would be disqualifying.

You may appeal the decision of the board in accordance with the Administrative Procedure Act.

You cannot file another application with the same board within 2-years after the final decision, except if you have taken action to fix the disqualification as instructed by the board, you may file another application with the same board 6-months after the final decision on the previous application.

**Statute Reference: 84-933 to 84-948**

**CONTACT INFORMATION:** Licensure Unit, 301 Centennial Mall South, P.O. Box 94986, Lincoln, Nebraska 68509-4986  
 Telephone: 402-471-2117 / FAX: 402-742-1106 / E-Mail: dhhs.licensure2117@nebraska.gov

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**Preliminary Application  
 CONVICTION REVIEW**

**Fee: \$100 per license type**

<b>SECTION A: INFORMATION</b>			
1	Type of License you are Considering: <input type="checkbox"/> Alcohol and Drug Counseling <input type="checkbox"/> Body Art <input type="checkbox"/> Cosmetology <input type="checkbox"/> Electrology <input type="checkbox"/> Esthetics  <input type="checkbox"/> Funeral Directing and Embalming <input type="checkbox"/> Massage Therapy <input type="checkbox"/> Medical Nutrition Therapy <input type="checkbox"/> Mental Health  <input type="checkbox"/> Nail Technology <input type="checkbox"/> Nursing Home Administrator <input type="checkbox"/> Psychology <input type="checkbox"/> Social Work		
2	You must print your <b>Legal Name</b> below First: <input style="width: 250px;" type="text"/> Middle: <input style="width: 200px;" type="text"/> Last Name: <input style="width: 200px;" type="text"/>  List any other names you are or have been known as (AKA), including maiden and your last name on your birth certificate. <input style="width: 100%; height: 30px;" type="text"/>		
3	Address:	Street/PO/Route: <input style="width: 95%;" type="text"/>	
	City: <input style="width: 300px;" type="text"/>	State or Country: <input style="width: 150px;" type="text"/>	Zip: <input style="width: 100px;" type="text"/>
4	Date of Birth (Month/Day/Year): <input style="width: 350px;" type="text"/>	Place of Birth (City/State or COUNTRY): <input style="width: 450px;" type="text"/>	
5	Phone #: <input style="width: 350px;" type="text"/>	E-Mail Address: <input style="width: 450px;" type="text"/>	
6	Social Security Number: <input style="width: 150px;" type="text"/>	#: <input style="width: 150px;" type="text"/>	
	If you have an A# or I-94# check the correct box(s) and provide your number	<input type="checkbox"/> Alien Registration Number ("A#"): <input style="width: 200px;" type="text"/>	<input type="checkbox"/> I-94#: <input style="width: 200px;" type="text"/>
Neb. Rev. Stat. §§38-123 and 38-130 requires you to provide your social security number to DHHS. Although your number is not public information, DHHS may share your social security number for child support enforcement or other administrative purposes and provide it to the Department of Revenue or the Department of Labor.			

<b>SECTION B: CONVICTION INFORMATION</b>		
<b>List below the</b> misdemeanor(s) or felony conviction(s) you wish to be reviewed by the Board.		
Name of Conviction	Date of Action	Name of Court Taking Action

