## DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD

SU	BJE	СТ:	SSN:		
1.	Q: A:	Have you ever been arrested for or charg	jed with a crin	ne involving a child?	
2.	Q: A:	Have you ever been involved with physic	al injury or se	exual maltreatment of a child?	
3.	Q: A:	Have you ever been placed on probation child?	or asked to re	esign from employment for maltreatment of a	
4.	Q: A:	Have you ever been charged with or con	victed of an o	fense related to alcohol or drugs?	
5.	Q: A:	Have you in the last 5 years used, posse	ssed, supplied	l, or manufactured any illegal drugs?	
PRIVACY ACT STATEMENT In accordance with 5 U.S.C.552a(e)(3), the following information is provided when collecting personal information directly from the individual:					
AUTHORITY: 42 U.S.C. § 13401.					
<b>PURPOSE:</b> (1) Safety and well-being of children using Federal Government Child Care Services. (2) Compliance with the P.L. 101-647 (November 29, 2990), codified 42 U.S.C. § 13401.					
ROUTINE USE:					
<b>DISCLOSURE:</b> If you do not complete each item, this failure will impede successful processing of your investigation. You cannot be hired or continue employment unless a criminal background check has been completed.					
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## CERTIFICATION

I CERTY THAT I have read and understood each question. My statement and any attachments are true, complete, and correct to the best of my knowledge. I understand that a knowing and willful false statement will result in non-selection of employment.

(Subject's Signature)

(Date)

SUBJECT INTERVIEW					
SUBJECT:	SSN:				
AUTHORITY: 42 U.S.C. § 13401.					
SF-86, reviewed of questionable information and was found to be:					
Favorable.					
<b>Questionable</b> for the following reason:					
The subject has been advised that the record check is condition of employment, the subject has the right to obtain a copy of the result of the record check, and the employee has the right to challenge the accuracy and completeness of any information contained in this report.					
(Subject's Signature) (Interviewer	's Signature)				
	s Signature)				
(Date)					