

LOCAL FILE OR NAME CHECK REQUEST

For use of this form, see AR 190-45; the proponent agency is the DES, Fort Liberty, NC

PRIVACY ACT STATEMENT

Authority: AR 190-45; Title 5, U.S.C. Section 301.

Principal Purpose: To provide information on individuals requiring a local background check.

Routine Use: Law enforcement background check using the Army Law Enforcement Reporting and Tracking System (**ALERTS**).

Disclosure: Voluntary. However, the LEC will not provide any background information unless the form is signed by the requestor and accompanied by the requestors valid DOD identification card or state driver's license.

SECTION A - Instructions

1. Requestors complete Sections B and C of this form and email it to usarmy.liberty.imcom.mbx.police-services@army.mil. The recommended signature is digital; however, the LEC accepts hand signatures.
2. The LEC Records Clerk must verify the requestor's credentials before accessing the ALERTS database.
3. After positive verification, the LEC Records Clerk completes Section D and provides the results to the requestor.
4. The LEC Records Clerk will provide findings in Section D.
5. The LEC Records Clerk will email the completed form back to the requestor's provided email address.

SECTION B – Applicant Information

1. NAME (LAST, FIRST MI).	2. SOCIAL SECURITY NUMBER.	3. DATE OF BIRTH.
4. CURRENT UNIT OR ORGANIZATION.	5. REASON FOR BACKGROUND CHECK.	

SECTION C - Requester Information

6. I am making this request on the behalf of:

- Myself. (Complete blocks 10 - 12)
- Another. By checking this block, I am asserting that I am requesting this check for an official government purpose within my authority and scope. (Complete blocks 7 - 12)

7. NAME (LAST, FIRST MI).	8. POSITION/TITLE.	9. UNIT OR ORGANIZATION.
10. Email.	11. DATE.	12. SIGNATURE.

SECTION D – File or Name Check Results (Law Enforcement Center Use Only)

13. A check of the Army Law Enforcement Reporting and Tracking System (ALERTS) resulted in the following finding(s).

- No records found.
- Other. (See remarks)
- Founded offense(s).

Date	LER Number	Offense(s)

14. REMARKS.

15. NAME (LAST, FIRST MI).	16. TITLE / ORGANIZATION.
17. SIGNATURE.	18. DATE.