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## **Disclosure of Criminal Records and Certification/Licensure Concerns**

### **Introduction**

Disclosure of criminal histories and certification/licensing concerns might be a daunting undertaking, but it is required if you wish to be forthright and honest about your history. Whether you are pursuing certification or licensing, or just wanting to advance in your life, it is crucial to know how to manage these difficulties in a truthful and constructive manner.

In this guidance, we will discuss the many elements of revealing criminal histories and certification/licensure difficulties, including:

- What information must be disclosed,
- When it must be disclosed, and
- How to provide it in a clear, succinct, and effective manner.

In addition, we will provide guidance and tools for navigating the disclosure process so that you may go forward with confidence and make the greatest decisions for your future.

At the core of this guidance is the concept that honesty is essential to establishing trust with future employers, certifying or licensing organizations, and anyone who may need to know about your past experiences. By approaching the disclosure process with an open mind and a willingness to learn, you may position yourself for professional and personal success by proactively addressing any concerns or challenges that may arise.

\*Keep in mind that by hiding, misrepresenting, or failing to disclose any and all listed items in the supplemental background could result in denial and or revocation of your license/certificate\*

### **Why do I have to disclose and why is important?**

Simply put, it's a requirement for you to disclose any and all criminal history with the REMSA under multiple health and safety code statues and under the California Code of Regulations.

Some of the specific laws and regulations regarding disclosure: Health and Safety Code 1797.11, 1797.118. California Code of Regulations Title 22, Chapter 10, Article 4, 100347.

## What if I do not have to disclose?

Yes, it is true there are some disclosures that fall under different penal codes within California law. However, keep in mind that if you went through the courts and received “expungement” and the conviction still appears on your Live Scan results, we have the right to ask about the conviction(s). Additionally, it is your job to know which expungements you have received, and whether they qualify as non-disclosable. Bear in mind that the background checks we run as a government agency entitle us to more information than a standard employer or another employment field might be entitled to.

*Sample of application form for criminal background disclosures:*

▼ Criminal History

You are required to declare **any and all misdemeanor and/or felony convictions**, including those that have been reduced, expunged, or set aside. Additionally, any actions taken under the Uniform Code of Military Justice must also be declared. Please keep in mind that as a Government Agency, we have access to background information that may not be shown on background checks obtained through other sources.

**Failure to disclose any of the above listed items will result in denial of an EMS credential. This denial will last a minimum of one year and extends to all EMS certifying bodies within California.**

If you have any questions or concerns regarding your background, we highly recommended you ask to speak with the EMS Specialist prior to submitting your application.

Application fees are non-refundable.

**\*Have you EVER been convicted of a Felony?:**  Yes  
 No

**\*Have you EVER been convicted of a Misdemeanor?:**  Yes  
 No

**\*Are there ANY criminal charges currently pending against you?:**  Yes  
 No

**\*Have you EVER had a Certification, Accreditation or Professional Healing Arts license denied, suspended, revoked, fined, or placed on probation?:**  Yes  
 No

**\*Are you under investigation at this time?:**  Yes  
 No

If you answered **"YES"** to any of the above questions, you will receive a **Supplemental Background Check Form** where you will add in details concerning these events. This form will appear in your online profile at the "Continue" link after you complete and submit this application. If you have any questions you may contact our helpful certification representatives at (951) 358-5029.

**\*Keep in mind what is in the grey box! If you check yes to “ANY” of the answers listed, it will generate a Supplemental Background Check Form for you and only you to complete”**

## Sample Supplemental Background Check Form:

### Supplemental Background Check Form

#### 1. Previous Disclosure(s)

All background issues must be reviewed by an EMS Specialist at REMSA. If you are renewing an EMS credential (EMT, Paramedic, MICN), and you have not previously disclosed your background items, please enter all information as described below. Renewing/Recertifying applicants whose backgrounds were already disclosed and approved by an EMS Specialist at REMSA do not need to resubmit narratives if the information is already on file. Please follow these instructions:

- If you **HAVE** previously disclosed this information to the Riverside County EMS Agency (REMSA), please verify that it appears correctly in the table under Section 3, *Criminal History & Credential Action(s)*. Since we have implemented this new digital system, we do not have digital records for most convictions and appreciate your assistance in ensuring that this information is entered accurately. You **do not** need to write a personal narrative for previously-disclosed events.
- If you **HAVE** previously disclosed this information but it **does not appear** in Section 3, *Criminal History & Credential Action(s)*, **you must** enter it below in Section 3. If you have previously had your background items reviewed and certified by a REMSA EMS Specialist, you **do not** need to write a personal narrative for previously-disclosed events.
- If you **HAVE NOT** previously disclosed your background information, **you must** complete both Sections 3 and 4.

Please note that failure to follow these instructions and submit this form completed may result in processing delays. Please call the EMS Agency if you have questions about this form or to verify previously disclosed information, obtain court dates from submitted documentation, etc., (951) 358-5029.

#### 2. New Disclosure(s)

New personnel must submit detailed narratives and information for each issue that resulted in a "yes" answer to the Background questions. As a NEW applicant or a NEW TO REMSA applicant, you must list all prior criminal conviction(s) and/or credential action(s) you have received, in Sections 3 & 4 below. This includes pending court appearances.

#### 3. Criminal History & Credential Actions

**Please enter all of the requested information below to complete the criminal convictions history for each offense, including any credentialing actions.**

If you have more than one offense and/or credentialing action, you will need to click on the  button after each offense included in this section.

#### Additional Reporting Guidelines:

1. Under **Type/Name of Offense or Disciplinary Action** list the actual offense, either by name or code number (example: DUI or PC 23152(b)) or the license action (example: probation of my paramedic license). Do Not simply state "misdemeanor."
2. **Date of Conviction or Action** is the date of conviction, not the date of arrest. If you cannot recall the exact date, it is alright to list it as the first of the month in which you think it happened (example: 4/1/2008) or January 1 of the year in which you think it happened (example: 1/1/2008).
3. **Location of Offense or Action (County)** refers to the city and state where the actual offense occurred.
4. **Name of Court or EMS Agency** will be the *county Superior Court* (example: LA Co Sup Court) or the *EMS office* (example: LACo EMS) that gave you the cert action.
5. Under **Action Taken**, be specific. Do not simply write "guilty" (example: pled Nolo. Received \$1800 fine, 3 months of classes, counseling, and AA meetings for 6 months. Eventually dismissed by 1203.4).

\*Type/Name of Offense or Disciplinary Action:

\*Date of Conviction or Action:  Today

\*Location of Offense or Action (County):

\*Name of Court or EMS Agency:

\*Action Taken:

#### 4. Personal Narrative Information

A Personal Narrative is required for any "yes" answers to criminal conviction questions. Narratives should be viewed as a means for you to provide any details that may explain why you have a conviction on your record. Court documents only provide one side to the story whereas a personal narrative allows you to elaborate on what you remember and experienced.

Please provide as much detail as possible. We will be using this information when making our final determination. A Personal Narrative must

- Circumstances leading up to the event. For example: "I had been at a BBQ when we ran out of ice. I decided to pick some up at 7/11 when..."
- Who was there and how events unfolded
- Your mental/physical/emotional state (if relevant)
- What you were charged with
- What you were convicted on (may be different than your arrest charge)
- Date of conviction
- Court ordered consequences:
  - Jail time - actual jail, home monitoring, or credit for time served (CTS)
  - Fines/fees
  - Required classes, courses, or counseling - type, length and whether or not completed
  - Community service - number of days, date of completion
  - Any other required penalty

Here is an example of a personal narrative:

*In September of 2018, I was driving home at about 1am after having a few drinks with some friends from work. I had worked 16 hours that day because someone called in sick. It was very busy that day and we all felt like we needed to unwind a bit so we went to the bar across the street after we closed up. I was quite tired so I only had a couple beers and left. About 2 miles from home I got pulled over by the CHP. He said he pulled me over because I was weaving somewhat. He asked me if I had been drinking and I said I just had some beer, but that I had worked a long day. He had me step out of the car and gave me one of those drinking tests where I had to stand on one leg and touch my nose and then say the alphabet backwards. He told me I failed the test and he arrested me for drunk driving. When I went before the judge I was charged with DUI (VC 23152) and reckless driving (VC 23103.5). I wanted to fight it because I wasn't drunk (my breath test said I was .07 so I was below the limit), but my lawyer explained that it would be easier to accept the reckless driving and get the DUI dropped. That's what happened. In December, I pled guilty to reckless driving and had my license suspended for 30 days, had to pay \$656 dollars, and had to take a 12-hour alcohol education class. I have paid off all the fines and finished the class in April of 2019.*

*I have attached the completion certificate from the class and a receipt showing my balance is \$0. I never drink and drive anymore regardless of how many drinks I have. If there is not a designated driver in my crowd, I call for a ride (Uber, Lyft, etc).*

Conviction/Issue 1

Conviction/Issue 2

Conviction/Issue 3

Conviction/Issue 4

4. Declaration & Signature

I declare under penalty of perjury that the information I am submitting is true and correct to the best of my knowledge.

Signed on

The above is a blank copy of what you receive as a supplement to your application.  
 \*\*\*THIS MUST BE COMPLETED EVERY TIME FOR INITIAL APPLICATIONS AND RENEWALS\*\*\* ONLY EXCEPTION IS BY **SPECIFIC EXPUNGEMENTS.**

## Example of What a Complete Supplemental Background Check form should look like:

5. Under **Action Taken**, be specific. Do not simply write "guilty" (example: pled Nolo. Received \$1800 fine, 3 months of classes, counseling, and AA meetings for 6 months. Eventually dismissed by 1203.4).

*Type/Name of Offense or Disciplinary Action:	<input type="text" value="Driving Under the Influence"/>
*Date of Conviction or Action:	<input type="text" value="01/15/2011"/> <a href="#">Today</a>
*Location of Offense or Action (County):	<input type="text" value="Riverside County, CA"/>
*Name of Court or EMS Agency:	<input type="text" value="Riverside Superior Court"/>
N/A	
*Action Taken:	<input type="text" value="\$1500.00 Fine/ AA classes/ Summary Probation"/>

### 4. Personal Narrative Information

A Personal Narrative is required for any "yes" answers to criminal conviction questions. Narratives should be viewed as a means for you to provide any details that may explain why you have a conviction on your record. Court documents only provide one side to the story whereas a personal narrative allows you to elaborate on what you remember and experienced.

Please provide as much detail as possible. We will be using this information when making our final determination. A Personal Narrative must include:

- Date of Occurrence (can be an approximate date)

Then you will move down to the personal narrative section, and you will write out a narrative as to the circumstance according to you about what happened. A sample narrative is attached to each Supplemental Background Check Form to illustrate what we are looking for. The details provided help us find mitigating circumstance to your situation. Simply writing a one sentence answer, although allowed, is not recommended when attempting to portray your side of the story regarding a convictions or past certification action.

### **What if I have more than one conviction/certification/investigation action?**

There is a large green "add another" button located on the form on the left-hand side under Section #3 of the Supplemental Background Check form. You will select that button and it will generate another row that is like the first one that you would have already filled out and simply follow the same process. However, in section #4 there is only enough space for 4 actionable items. If you need more space, we ask that you draft those responses on a word document and submit them to [emd-discipline@rivco.org](mailto:emd-discipline@rivco.org) so we may add that to your application as a supplemental document.

### **I fear applying because of my background, will I get denied or revoked if you find out?**

There are guidelines that all LEMSAs must refer to when making disciplinary decisions. Almost always, these guidelines will and must be followed. There are certain instances where the guidelines would not apply, however, that is on a rare case by case basis.

### CHECKLIST OF IMPOSED DISCIPLINE

The local EMS agency (LEMSA) shall use the "Recommended Guidelines for Disciplinary Orders and Conditions of Probation" in setting disciplinary matters when an EMT-I or AEMT applicant or certificate holder is subject to certification action due to disciplinary cause.

When making a decision regarding certification action pursuant to Section 1798.200 the LEMSAs may give credit for discipline imposed by the employer for the same conduct.

The tables on the reverse enumerate the recommended certification actions that may be taken by the LEMSAs and the optional terms and conditions of probation as detailed in the guidelines cited above. The left column of the table denotes the recommended action sought by the LEMSAs. The right column is used to denote the action imposed by the employer. Use the chart below to determine which optional conditions of probation are applicable to the violations listed in section 1798.200 of the Health and Safety Code.

Quick Reference				
Violation	Discipline			Optional Conditions of Probation
	Maximum	Recom'd.*	Minimum*	
1798.200(c):				
(1) Fraud in the Procurement	Rev/Denial	Rev/Denial	60 days	N/A
(2) Gross Negligence	Rev.	60 days, 3 years	3 years	5, 8, 9, 11
(3) Repeated Negligent Acts	Rev.	30 days, 3 years	1 year	5, 8, 9, 11
(4) Incompetence	Rev.	30 days, 3 years	1 year	5, 8, 9, 11
(5) Fraudulent, Dishonest, Corrupt Acts	Rev.	60 days, 3 years	3 years	6
(6) Conviction of a Crime	Rev.	Variable	1 year	N/A
(7) Violating Division 2.5 or Regulations	Rev.	60 days, 3 years	3 years	6
(8) Violating Drug Statutes or Regulations	Rev.	60 days, 3 years	3 years	1, 2, 3, 4, 10
(9) Addiction or Misuse	Rev.	Indef., 3 yrs <sup>‡</sup>	3 years	1, 2, 3, 4, 10
(10) Outside Medical Control	Rev.	15 days, 1 year	1 year	5, 8
(11) Irrational Behavior	Rev.	Indef., <sup>‡</sup>	1 year	8, 9, 10
(12) Unprofessional Conduct:				
(A) Mistreatment of Abuse of a Patient	Rev/Denial	60 days, 3 years	3 years	7, 10
(B) Failure to Maintain Confidentiality	Rev/Denial	30 days, 1 year	1 year	6, 9
(C) Commission of any PC 290 Offense	Rev/Denial	Rev/Denial	Rev/Denial	N/A

Note: Days refers to suspension, years refer to probation

\* Including all standard terms and conditions and optional conditions if applicable.

<sup>‡</sup> Suspension time is indefinite: until completion of a detoxification program or until resolution of the physical or mental disability.

The above appendix is based on the California Health and Safety Code 1798.200

## There is another regulation that we must adhere to under the California Code of Regulations:

22 CCR § 100214.3

### § 100214.3. Denial or Revocation of a Certificate.

#### Currentness

(a) A certifying entity, that is not a LEMSA, shall advise a certification or recertification applicant whose conduct indicates a potential for disciplinary cause, based on an investigation by the certifying entity prompted by a DOJ and/or FBI CORI, pursuant to Section 100210(a) of this Chapter, to apply to a LEMSA for certification or recertification.

(b) The medical director may deny or revoke any EMT or Advanced EMT certificate for disciplinary cause that have been investigated and verified by application of this Chapter.

(c) The medical director shall deny or revoke an EMT or Advanced EMT certificate if any of the following apply to the applicant:

- (1) Has committed any sexually related offense specified under Section 290 of the Penal Code.
- (2) Has been convicted of murder, attempted murder, or murder for hire.
- (3) Has been convicted of two (2) or more felonies.
- (4) Is on parole or probation for any felony.
- (5) Has been convicted and released from incarceration for said offense during the preceding fifteen (15) years for the crime of manslaughter or involuntary manslaughter.
- (6) Has been convicted and released from incarceration for said offense during the preceding ten (10) years for any offense punishable as a felony.
- (7) Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to the use, sale, possession, or transportation of narcotics or addictive or dangerous drugs.
- (8) Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to force, threat, violence, or intimidation.
- (9) Has been convicted within the preceding five (5) years of any theft related misdemeanor.

(d) The medical director may deny or revoke an EMT or Advanced EMT certificate if any of the following apply to the applicant:

- (1) Has committed any act involving fraud or intentional dishonesty for personal gain within the preceding seven (7) years.
- (2) Is required to register pursuant to Section 11590 of the Health and Safety Code.

(e) Subsection (a) and (b) shall not apply to convictions that have been pardoned by the Governor, and shall only apply to convictions where the applicant/certificate holder was prosecuted as an adult. Equivalent convictions from other states shall apply to the type of offenses listed in (c) and (d). As used in this Section, "felony" or "offense punishable as a felony" refers to an offense for which the law prescribes imprisonment in the state prison as either an alternative or the sole penalty, regardless of the sentence the particular defendant received.

(f) This Section shall not apply to those EMT's, or EMT-Is who obtain their California certificate prior to the effective date of this Section; unless:

- (1) The certificate holder is convicted of any misdemeanor or felony after the effective date of this Section.
- (2) The certificate holder committed any sexually related offense specified under Section 290 of the Penal Code.
- (3) The certificate holder failed to disclose to the certifying entity any prior convictions when completing his/her application for initial EMT or Advanced EMT certification or certification renewal.

(g) Nothing in this Section shall negate an individual's right to appeal a denial of an EMT or Advanced EMT certificate pursuant to this Chapter.

(h) Certification action by a medical director shall be valid statewide and honored by all certifying entities for a period of at least twelve (12) months from the effective date of the certification action. An EMT or Advanced EMT whose application was denied or an EMT or Advanced EMT whose certification was revoked by a medical director shall not be eligible for EMT or Advanced EMT application by any other certifying entity for a period of at least twelve (12) months from the effective date of the certification action. EMT's or Advanced EMT's whose certification is placed on probation must complete their probationary requirements with the LEMSA that imposed the probation.

#### **Credits**

NOTE: Authority cited: Sections 1797.107, 1797.176, 1797.184 and 1798.204, Health and Safety Code; and Section 11522, Government Code. Reference: Sections 1797.61, 1797.62, 1797.118, 1797.176, 1797.202, 1797.216, 1797.220, 1798, 1798.200 and 1798.204, Health and Safety Code.

#### HISTORY

1. Renumbering of former section 1000216 to new section 1000214.3, including amendment of section and NOTE, filed 5-18-2010; operative 6-17-2010 (Register 2010, No. 21).

This database is current through 2/3/23 Register 2023, No. 5.

Cal. Admin. Code tit. 22, § 100214.3, 22 CAADC § 100214.3

END OF DOCUMENT

[Documents in Sequence](#)

This specific regulation highlights what the medical director "shall" do and what he/she "may" do, in regard to rendering disciplinary action.

## **Conclusion**

To begin, it is essential to emphasize that we do not factor in any personal sentiments while making decisions on disciplinary action. The majority of the disciplinary measures that we conduct are founded on the principle that the rule of law, which is binary in nature, must be followed.

Yet, we are aware that each situation is unique and may have mitigating circumstances that a comparable instance did not have. This is something that we take into account prior to reaching a final recommendation or conclusion for the issue(s) at hand.

In the end, the medical director of the Agency that is issuing the license is the one who takes the ultimate judgment on all subjects pertaining to disciplinary action. It is the duty of the medical director to see to it that all disciplinary measures are carried out in accordance with the law and that the appropriate judgment is reached for each specific circumstance.

If you are going to be facing a hearing, it is imperative that you comprehend the fact that both you and the Agency are requesting the court's opinion on the matter. The judge will take into account all of the evidence that has been offered, and then base their judgment on the law. However, it is essential to keep in mind that the final decision will be made by the medical director of the organization that will be awarding the license. The medical director will examine all of the data and will make the ultimate decision based on what is in the best interest of the public's health and safety, including those of the organization and the person who is involved.

The Agency must make sure that the appropriate decision is made for each specific scenario by taking into account all of the essential information and circumstances. Do not hesitate to get in touch with us at any time in the event that you have any further questions or concerns.

You can always reach out to our disciplinary staff and speak with a REMSA certified investigator via email at [emd-discipline@rivco.org](mailto:emd-discipline@rivco.org)