



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

LISA J. PINO, M.A., J.D.
Executive Deputy Commissioner

April 7, 2021

DAL: DAL 21-03
DHCBS 21-06
NH 21-06
SUBJECT: Acknowledgement and Consent for
Fingerprinting and Disclosure of
Criminal History Record Information
DOH-102

Dear Administrator:

The purpose of this letter is to inform you that the Acknowledgement and Consent for Fingerprinting and Disclosure of Criminal History Record Information form has been updated with a Department of Health form number. The updated form, labelled DOH-102, may be found on the CHRC application under "Acknowledgement and Consent for Fingerprinting and Disclosure of Criminal History Record Information". Translations are also available in Bengali; Chinese Simplified; Haitian Creole; Korean; Russian; and Spanish.

If you have questions regarding the revised form, please contact us via the "Contact CHRC" button on the top, right-hand corner of the CHRC application for further clarification.

Sincerely,

Valerie A. Deetz, Deputy Director
Center for Health Care Provider Services and Oversight
Office of Primary Care and Health Systems Management

cc: J. Devik
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