Pre-Determination Request Form

Introduction. Prior to applying to the Ohio Department of Commerce (“Department”) for a certificate, license, permit, or registration (“License”), you may ask the Department to pre-determine whether the fact that you have been convicted of a criminal offense, by itself, disqualifies you from receiving a particular License. This form is meant to assist with that process.

Please note that, in some cases, the Department is not allowed to license you if you have been convicted of a certain criminal offense, regardless of the facts and circumstances of your conviction and/or your subsequent good behavior. For a list of automatically disqualifying criminal offenses, please visit [https://www.com.ohio.gov/documents/admn_DisqualOffenses.pdf](https://www.com.ohio.gov/documents/admn_DisqualOffenses.pdf). Additionally, you should also note that any pre-determination that you receive from the Department does not guarantee that you will receive a License. Your licensure application or a subsequent Department investigation, for example, may reveal grounds to deny your application exclusive from or in addition to the criminal convictions for which you seek pre-determination, including providing misinformation on this form.

This form is not an application or part of an application for a License.

Instructions. Please complete this form and mail or deliver it and the $5.00 pre-determination request fee to the Department at the address below. Payment of the fee must be by check or money order, unless delivered in person, in which case cash is accepted. (Please make out all checks and/or money orders to “Treasurer State of Ohio.”) No determination request is considered received until the Department receives payment of the $5.00 fee. If you have questions about this form or the fee, please call (614) 466-3636. If you seek a pre-determination for more than one conviction, please include each conviction on this form. If you do not have enough space in the spaces provided below, please attached additional sheets to this form.

Please mail or deliver all forms and pre-determination request fees to the Department at:

Ohio Department of Commerce
ATTN: Office of Legal Counsel
Pre-Determination Request Matters
77 South High Street, 23rd Floor
Columbus, Ohio 43215
Requestor Information

Your Full Legal Name: ____________________________________________________________

Any Name(s) under which You Were Convicted: ______________________________________

Date of Birth: ____________________ Telephone Number: ____________________________

Mailing Address: ________________________________________________________________

____________________________________________________________________________

Email Address: __________________________________________________________________

Preferred Means of Determination Notification (check one): ☐ by e-mail ☐ by regular mail

Type of License for which You Seek a Pre-Determination: ____________________________

What are the criminal offenses that you have been convicted of? Provide the applicable statutes if able. ________________________________________________________________

Date(s) of Conviction(s): _________________________________________________________

Date(s) of Underlying Offense(s): _________________________________________________

Location(s) of Underlying Offense(s): _____________________________________________

Court(s) of Conviction (Name, City/County, State): _________________________________

Case Number(s) of Conviction(s): ________________________________________________