Completing a Full Criminal Background Check (CBC) on ViewPoint

Step-by-Step Guide

Go to the ViewPoint Website

❖ Go to, https://www.viewpointscreening.com/uww , this link is also available in your Canvas assignment

❖ Click 'Start Your Order'

Click "Start Your Order" below and you will be directed through the application process. Once your order is submitted, you will receive a confirmation email containing a password to log into viewpointscreening.com. When your background check is completed, you can view/print a copy at viewpointscreening.com by entering your email address and password. Results are typically completed within 3-5 business days and will also be available to your school.
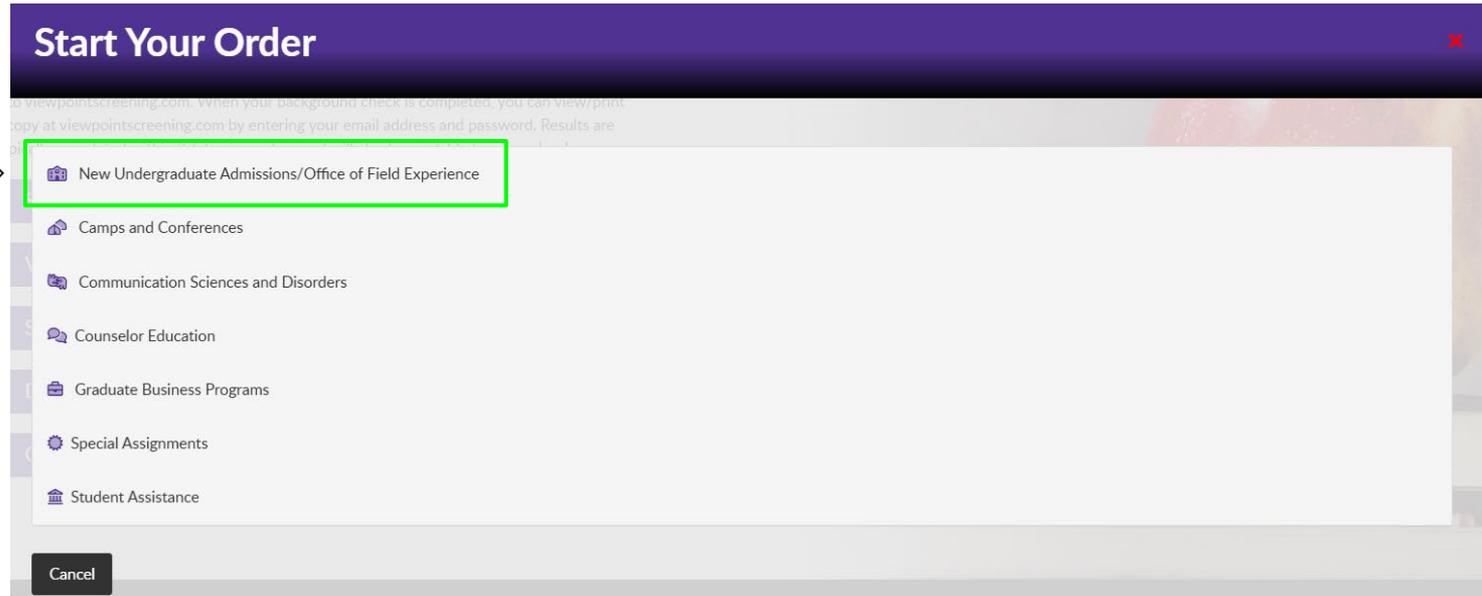
Start Your Order →

View Your Results →

Student FAQs →

Disclaimer →

Contact →

Start Your Order

❖ Select the option 'New Undergraduate Admissions/Office of Field Experience'
 ➢ Graduate students in the College of Education and Professional Studies should also select this option.

New Undergraduate Admissions/Office of Field Experience

❖ Click 'Background Check' if this is your first time completing a full background check in ViewPoint. Click 'Recheck Background Check' if you have already completed on.
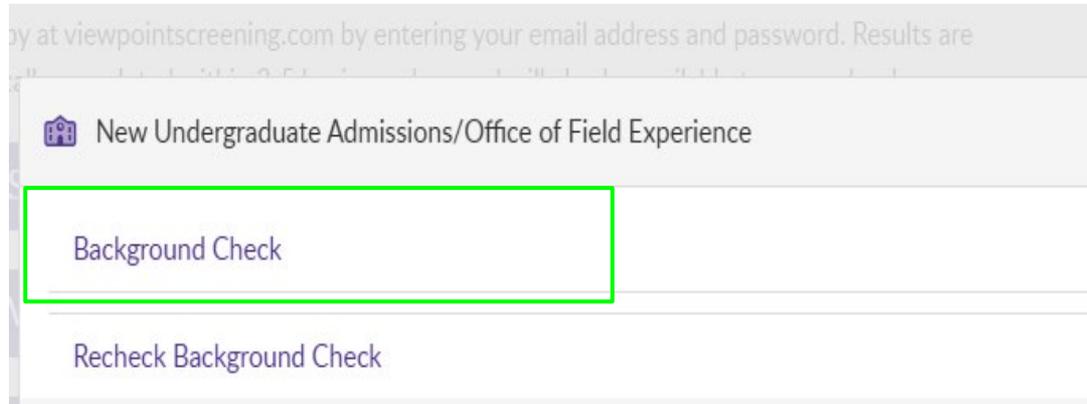
Placing an Order

❖ Click 'Confirm'

❖ Read through the Terms of Use and Refund Policy

❖ Click the box stating 'I have read, understand and agrees to the ViewPoint Screening Terms of Use and Refund Policy' Then click NEXT.

Complete Release Form

❖ Click on the box labeled 'Click to Complete Required Form(s)'

Complete Release Form

In order to obtain Wisconsin background check information, it is required that you complete a BID Form.

This is an automated process. Viewpoint Screening has created an electronic system that will allow you to easily complete the BID form. You will provide your personal data and answer all questions within a separate interface. You will not be able to move forward if any fields are left blank. The data provided will automatically be transferred to fill in the required BID form.

Click to Complete Required Form(s)

Background Information Disclosure (BID) form Page 1 of 3

- ❖ Select 'Student/Volunteer'
- ❖ Enter your full legal FIRST NAME
- ❖ Enter your middle name
- ❖ Enter your full legal LAST NAME
- ❖ Enter your date of birth (DOB)
  - ➢ Must include the slashes
    - ■ EX: 01-01-2000
- ❖ If you have had any previous names, including prior to marriage, type in the names

Background Information Disclosure (BID) form Page 1 of 3

❖ Scroll down
❖ Select your sex
❖ Enter your HOME ADDRESS
  ➢ Address, city, state, zip code
❖ Click NEXT

Sex

○ Male ○ Female

| Home Address | City | State | Zip Code |

| Business Name and Address – Employer (Entity) |

3 Pages

cancel

1 2 3

PREV **NEXT** SUBMIT FORM
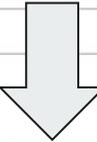
Background Information Disclosure (BID) form Page 2 of 3

❖ Answer ALL 7 questions HONESTLY by selecting Yes or No
  ➢ If you selected Yes, provide all required information
❖ Once ALL 7 questions are answered, Click NEXT

If Yes, list each state and the dates you resided there.

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6. Has any government or regulatory agency (other than the police) ever found that you abused an elderly person?

○ Yes ⦿ No

If Yes, explain, including when and where it happened.

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7. Do you have a government issued credential that is not current or is limited so as to restrict you from providing care to clients?

○ Yes ⦿ No

If Yes, explain, including credential name, limitations or restrictions, and time period.

3 Pages

cancel
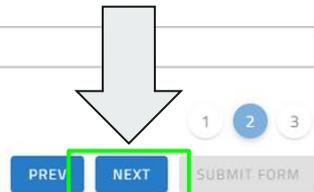
1 2 3

PREV NEXT SUBMIT FORM

Background Information Disclosure (BID) form Page 3 of 3

❖ Answer All 7 questions HONESTLY by selecting Yes or No
   ➢ If you selected Yes, provide all required information
❖ Once All 7 questions are answered
   ➢ Type your full legal INITIALS
   ➢ Type your FULL LEGAL NAME
   ➢ Type the date you are completing the form
      ■ Include slashes   EX: 08/20/2025
❖ Click 'Submit Form'

Double Check the BID Form

❖ Click the first link to double check the information is accurate on the BID form
  ➢ This will open as a PDF in Adobe
❖ If the information is accurate, click 'CONTINUE'
❖ If the information is inaccurate, click 'FIX DOCUMENT'
  ➢ This will take you back to the BID Form where you can update your answers to ensure accuracy.
❖ Once all information is correct, select 'CONTINUE'

VIEWPOINT **VP** SCREENING ⊗

You're Almost Finished...
You must check the document for accuracy

Check your document for accuracy by clicking on this link:
BACKGROUND INFORMATION DISCLOSURE (BID) FOR ENTITY EMPLOYEES AND CONTRACTORS

Fix document

If you have confirmed that everything is correct, please Continue.
If the document is not filled out correctly, your Wisconsin background check will be cancelled and you will be required to place a new Wisconsin order at the cost of $5.00.
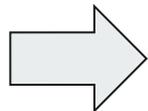
CONTINUE

Applicant Information

❖ You will be brought back to the page where you first opened the BID Form
❖ Now complete all fields under 'APPLICANT INFORMATION'
  ➢ Legal First Name
  ➢ Legal Last Name
  ➢ Middle Initial if applicable
  ➢ ANY aliases/maiden names you have
  ➢ Social Security Number (SSN)
    ■ It provides the dashes for you
  ➢ Date of Birth (DOT)
  ➢ Gender
  ➢ Phone Number

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The following PDF will be attached to your order.
Click to View

Applicant Information

Do not place an order on someone's behalf. This form must be filled out by the individual who requires Viewpoint Screening services.

First Name :	John
Last Name :	Doe
Middle Name:	
Alias/Maiden Name 1:	Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.
Alias/Maiden Name 2:	Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.
Alias/Maiden Name 3:	Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.
Social Security Number :	123 - 45 - 6789 Please Note: If you have not been issued a valid U.S. SSN then enter all zeros (000-00-0000) instead.
Date of Birth :	01 / 01 / 2000 (mm/dd/yyyy)
Gender :	⦿ Male ◯ Female
Phone Number :	123-456-7890 (111-111-1111)

Applicant Information EMAIL

- ❖ Scroll down to E-Mail address
- ❖ **IMPORTANT!**
  - ➢ **DO NOT USE YOUR UW-WHITEWATER EMAIL**
  - ➢ **USE A PERSONAL EMAIL**

It is crucial that you use a PERSONAL EMAIL. After graduation or if you transfer schools, your UW-Whitewater email will be deactivated and you will not be able to access your results.

E-Mail Address*:

IMPORTANT
Your email address will be your user name to log in. Login names cannot be changed.

Please make sure you are entering your correct email address. You will be unable to log in or receive communications from Viewpoint Screening if your email address is not valid.

johndoe@gmail.com ✓
Type E-mail address.

johndoe@gmail.com ✓
Re-type E-mail address.

If you already have an account:
Please use the same email address to prevent separate logins.

Separate logins will contain separate results / medical documents, and cannot be combined.

Current Residential Address

❖ Fill in your CURRENT address
  ➢ Street Address
  ➢ City
  ➢ State/U.S Territory
  ➢ Zip Code
❖ Click NEXT
❖ Confirm that all info is correct
  ➢ Click OK

Current Residential Address:

If applicable, your address will used to determine your drug test collection location.

Address :	
City :	
State or U.S. Territory :	Wisconsin ✓
	For an international address, select "International" and select the foreign Country name below.
Country :	United States
Zip Code :	✓ ZIP Code Look Up Tool
	Please Note: If you have an international address that does not require a Zip Code, please fill in "00000".

Please make sure you have provided correct information. Changes cannot be made once you have placed your order.

Back **Next** ⬅

www.viewpointscreening.com says

PLEASE CONFIRM THAT YOUR INFORMATION IS CORRECT. PRESS OK TO SUBMIT OR CANCEL TO EDIT

Email:
First Name:
Middle Name:
Last Name:
Alias/Maiden Name 1:
Alias/Maiden Name 2:
Alias/Maiden Name 3:

OK **Cancel**
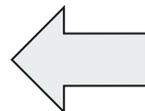
Payment Information

❖ Accurately fill in all payment information
  ➢ First name
  ➢ Last name
  ➢ Credit card number
  ➢ Expiration date
    ■ Correct: 05/2026
    ■ Incorrect : 05/26
  ➢ CVV
  ➢ Credit card type
  ➢ Email address to send receipt
  ➢ Phone number
  ➢ Street Address
  ➢ City
  ➢ State
  ➢ Zip Code
❖ Select NEXT
  ➢ Click NEXT only once. Clicking multiple times may result in duplicate charges.

Payment Information

First Name*:	
Last Name*:	
Credit Card Number*:	
Exp. Date*:	Year must be 4 digits (MM/20YY)
CVV*?	
Credit Card Type*:	Select Card Type
Contact Name (if business):	
Email*:	Payment receipt will be sent to this email
Phone Number*:	
Address*:	
City*:	
State*:	
Postal Code*:	

♦ ATTENTION: Your credit card will be charged $ 48.00 when you click "Next." This price is for the package that you selected. If you did not select the correct package, do not continue. Go back and select the correct package. All sales are final.

♦ Do not click "Next" more than once or your card may be charged multiple times.

♦ Viewpoint Screening is not responsible for accidental orders or mistakes made durin the order process.

Back   Next

Receipt

❖ The email you entered in the Payment Information section will get an email with a receipt.
❖ Take a screenshot of the receipt (or the confirmation page) and upload it to the Canvas assignment.

Background Check

ordered by: Victoria Marian / torimarian2024@gmail.com
on: 8/14/2025

for: UNIVERSITY OF WISCONSIN-WHITEWATER - COLLEGE OF EDUCATION

Student ID (if applicable):

RELEASE FORM

Transaction Receipt from Viewpoint LLC for $48.00 (USD)
1 message

Auto-Receipt <noreply@mail.authorize.net>
Reply-to: Josh Kneeland <info@viewpointscreening.com>
To:

Payment was made for one or more of the following services: Background Check, Drug Test, Immunization Management, eLearning. Alternative payment receipts are not available.

Order Information
Description: Goods or Services

Billing Information   **Shipping Information**
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Total: $48.00 (USD)

Payment Information
Date/Time: 14-Aug-2025 12:32:36 EDT
Transaction ID: 121184235206
Payment Method: Visa xxxx
Transaction Type: Purchase
Auth Code: 315677

Merchant Contact Information
Viewpoint LLC
Wilmington, NC 28401
US
info@viewpointscreening.com
All payments are non-refundable under any circumstances. You have agreed to the Terms of Use and Refund Policy and you have acknowledged that there are no refunds that can be issued. A payment dispute through your credit card company will result in immediate account removal from viewpointscreening.com, including logins, results and documents. Viewpoint Screening reserves the right to assess service fees for all chargebacks and returns.