# **Adam Walsh State Contacts and Procedures for Child Abuse Registry Checks**

We strive to keep this list accurate and up to date. If you do notice any discrepancies, please contact us at <a href="mailto:centersupport@usf.edu">centersupport@usf.edu</a> so we can make any needed corrections.

STATE	CONTACT INFO	REQUIREMENTS/PROCEDURES
ALABAMA	Jon Perdue Program Manager Office of Child Protective Services Alabama State Dept of Human Resources, Family Services Division 50 Ripley Street Montgomery, AL 36130  Phone: (334) 242-9500 Fax: (334) 242-0939 Email: jon.perdue@ dhr.alabama.gov	Form Required: Alabama Department of Human Resources Child Abuse/Neglect (CA/N) Central Registry Clearance  Original copy required, must be mailed or hand- delivered to office.  Complete instructions available Online: <a href="http://www.dhr.alabama.gov/services/Child_Protective_Services/CentralRegistryClearance.aspx">http://www.dhr.alabama.gov/services/CentralRegistryClearance.aspx</a>
ALASKA	Department of Health & Social Services 323 East 4 <sup>th</sup> Avenue Anchorage, AK 99501  Phone: (907) 269-4026 Fax: (907) 269-4098	Form Required: Clearance Form  Email completed form to:     Hss.ocsanccpchecks@alaska.gov  Complete Instructions Available Online:     http://dhss.alaska.gov/ocs/Pages/childprotection/default.aspx
ARIZONA	Arizona Department of Child Safety Central Registry Site code C035-2, P.O. Box 6030, Phoenix, AZ 85005-6030 C/o Yvonne Santos Phone: 602-364-4255 Fax: (602) 265-3993	Form Required: Form CSO-1131A https://dcs.az.gov/file/14097/download?token=AYfSEg Oh To be used for licensing foster families who have lived outside of the State of Arizona in the last five years. For questions, contact Debra Stanton at (602)255- 2801or FHLAWA@azdcs.gov. This form may be faxed to (602)265-3993 https://dcs.az.gov/content/cso-1131a  Form CSO-1058A https://dcs.az.gov/file/12889/download?token=32jjldV 8 To be used for placing children. For questions, contact Yvonne Santos at (602)364- 4255, Jermaine Moore-Tabron at (602)255-2642, or DCSCentralRegistry@azdcs.gov This form may be faxed to (602)255-3259 https://dcs.az.gov/content/cso-1058a

Form DCS-1083A https://dcs.az.gov/file/13311/download?token=iUts8V VO

To be used for employment purposes.
For questions, contact Yvonne Santos at (602)364-4255, Jermaine Moore-Tabron at (602)255-2642, or <a href="mailto:DCSCentralRegistry@azdcs.gov">DCSCentralRegistry@azdcs.gov</a>
This form may be faxed to (602)255-3259
<a href="https://dcs.az.gov/content/dcs-1083a">https://dcs.az.gov/content/dcs-1083a</a>

Adam Walsh requests requires an **email address** and must be **typewritten**. Incomplete, hand written or unsigned requests cannot be processed and will be returned.

Additional info can be found online here: <a href="https://dcs.az.gov/">https://dcs.az.gov/</a>

ARKANSAS

Arkansas Child Maltreatment Central Registry

P.O. Box 1437, Slot S 566 Little Rock, AR 72203

Phone: (501) 682-0405

Fax: (501) 682-0407

**Form Required:** Application for Child Maltreatment Central Registry, available for download here (at bottom of page):

http://arkedu.state.ar.us/commemos/static/fy0809/

<u>4299.html</u>

https://humanservices.arkansas.gov/images/uploads/d

dds/ChildMaltreatmentCheck.pdf

Fax this form and standard cover letter on

letterhead.

**CALIFORNIA** 

California Dept. of Justice

Bureau of Criminal Information & Analysis

CACI

P.O. Box 903387 Sacramento, CA 94203

Phone: (916) 210-4092 Fax: (916) 227-5054

Caci-inquiry@doj.ca.gov

Form Required: <u>BCIA 4057 Child Abuse Central</u> <u>Index Inquiry Request for Out of State Foster Care &</u>

**Adoption Agencies** 

Original signature required, form can only be

submitted by mail.

\$15 Processing fee

More information available online:

http://oag.ca.gov/childabuse/outofstatefosteradopt

<u>ion</u>

Note: CA does not have a mechanism for releasing information for the purpose of Investigation unless to Law Enforcement conducting an investigation of a

child abuse case.

**COLORADO** 

CDHS Background Investigation Unit 1575 Sherman Street, Ground Floor Denver, CO 80203

Phone: (303) 866-7436 or

866-4614

Form Required: BIU Individual Inquiry Form

https://dcfs.my.salesforce.com/sfc/p/410000012srR/a/41000000Cfvz/hsgwrNUiscdkir3QQ2yL3JJjjbm4tq

kyQFaNej0HBVI

Original Signature Required, form can only be

submitted by mail.

\$35 Processing Fee, made payable to CDHS, BIU,

Records and Reports

More Information available online:

		http://coloradoofficeofearlychildhood.force.com/oe c/OEC_Providers?p=Providers&s=Background- Checks⟨=en
CONNECTICUT	Department of Children and Families Careline 505 Hudson Street Hartford, CT 06106	Form Required: DCF-3031  https://portal.ct.gov/-/media/DCF/Policy/NEW-fillin-Forms/DCF-3031O.pdf?la=en  DCF-3033 Foster Care and Adoption Background Search Release, available on this page: https://portal.ct.gov/-/media/DCF/Policy/NEW-fillin-Forms/DCF-3033-O.pdf?la=en
DELAWARE	DSCYF, OCCL Criminal History Unit 1825 Faulkland Road Wilmington, DE 19805 Phone: 302-892-5800 Fax: 302-633-5191	Form Required:  Delaware Child Protection Registry Request Form  More information available online: <a href="http://kids.delaware.gov/information/adamwalsh.s">http://kids.delaware.gov/information/adamwalsh.s</a> <a href="http://kids.delaware.gov/information/adamwalsh.s">httml</a>
DISTRICT OF COLUMBIA	Child & Family Services Agency Child Protection Register 200 I Street, SE Washington, DC 20003 Phone: 202-442-6100 Fax: 202-727-8040 Email: cfsa@dc.gov	Form Required: <a href="https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR Check Application FI NAL 030818 English fillable 0.pdf">https://cfsa.dc.gov/sites/default/files/dc/sites/CPR Check Application</a> )  Submit letter via Fax, Attn: Supervisor, DC Child Protection Register Unit. Additional information may be available online: <a href="http://cfsa.dc.gov/service/background-checks">http://cfsa.dc.gov/service/background-checks</a> <a href="https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR%20Check">https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR%20Check</a> %20FAQ%2010-06-17.pdf
FLORIDA	Florida Department of Children and Families Office of Child Welfare 1317 Winewood Blvd. Tallahassee, Florida 32399-0700  Fax: 850-487-6064 Email:adamwalsh.requests@ myflfamilies.com	Form Required: https://www.myflfamilies.com/service- programs/abuse- hotline/docs/CentralAbuseHotlineRecordSearch.pdf *Submit via Fax or email  Additional information may be available here: https://www.myflfamilies.com/service- programs/background-screening/  Background Screening Help Desk: 888-352-2849

TTY: 711

GEORGIA	Georgia Dept of Human Services Attn: Child Protective	Georgia's Child Protective Services Information System (Child Abuse Registry)
	Services Screening 2 Peachtree St. NW, 18 Floor Atlanta Georgia 30303	For requests related to open or on-going investigations, complete as much information as possible on the application. The section related to current household members will not need to be completed. (The agency representative will need to sign the application.) For requests related to prospective foster/adoptive applicants, complete all boxes (with the exception) of the current household members. If the purpose of the request is for adoption of any kind and or foster care, the potential applicant(s) must sign. Provide the purpose (adoption, foster care, investigation, home study, employment etc.) of the request and identifying information on your state agency letterhead and submit all documents together.  Online screening request: <a href="https://gacar.dhs.ga.gov/Screening/Home/AgencyRequest">https://gacar.dhs.ga.gov/Screening/Home/AgencyRequest</a> (State or government agency of this state or any other states.)  Downloadable submission form: <a href="https://gacar.dhs.ga.gov/General/Home/Download/1?option=view">https://gacar.dhs.ga.gov/General/Home/Download/1?option=view</a> or click here for fillable form. (Must be typed)  * Georgia will not allow a private foster care agency access to their Central Registry check
GUAM	Bureau of Social Services Administration Department of Public Health & Social Services 194 Hernan Cortez Avenue Hagatna, Guam 69610	Form Required: None. Print request for information on letterhead.  Signed release required.  Contact: Linda.rodriguez@dphss.guam.gov
	Phone: 671-475-2653 or 671- 475-2672 Fax: 671-477-0500	
HAWAII	Department of Human Services Child Welfare Services Section	Form Required: Consent to Release Information from the Child Protective Services System Central Registry
	420 Waiakamilo Road, Suite 300A Honolulu, HI 96817	Original form must be mailed.  Additional Information available online:
	Phone: 808-832-0609 Fax: 808-832-0628	http://humanservices.hawaii.gov/ssd/backgroundcheck/

Idaho Department of Health & Website: https://chu.dhw.idaho.gov IDAHO Welfare Criminal History Unit Form: The form is the authorization from the Attn: CWIS subject of the search to complete the Idaho Child P.O. Box 83720 Protection Registry Check. Boise, ID 83720 Form: Phone: (208) 332-7990 https://chu.dhw.idaho.gov/documents/Idaho CP Regi stry\_Check\_Request\_Form.pdf Fax: (208) 332-7991 crimhist@dhw.idaho.gov Go to: Instructions <a href="https://chu.dhw.idaho.gov">https://chu.dhw.idaho.gov</a> Contact: Fernando Castro, Program Is the Form Required? Yes Supervisor Email: Signed release required? Yes – signed and notarized castrof@dhw.idaho.gov Methods of Transmission: Mail, fax, e-mail with attachment scanned in PDF format. Fee: \$20 per search. Will accept check or money order payable to **IDHW** that accompanies the request. Note: Processing fees are reimbursable under Title IV-E administrative expenses. Department of Family & Form Required: CFS 689 Authorization for **ILLINOIS Children Services** Background Check for Programs NOT Licensed by 406 E. Monroe Street, Station DCFS (note: This form is also available in Spanish at http://www.illinois.gov/dcfs/aboutus/notices/Pages Springfield, IL 62701 /default.aspx) Phone: 217-557-0758 Fax: 217-782-3991 Request may be submitted via mail, fax or email. Please specify on subject line: Out-of-State Child Welfare Indiana Dept. Of Child Requests for CPI/CPS history checks must be INDIANA Services, COBCU submitted via Indiana's on-line portal. 302 W. Washington St. Room E306, MS08 For updates and implementation of this new Indianapolis, IN 46204 portal and information specific to CPI/CPS History Check Requests, please visit the IN DCS

Fax: 317-234-4633

Email:

background.checkunit@dcs.i

n.gov

at: <a href="https://www.in.gov/dcs/3928.htm">https://www.in.gov/dcs/3928.htm</a>

Additional information may be available online:

http://www.in.gov/dcs/2363.htm

Background Check Webpage

IOWA	Central Abuse Registry Iowa DHS P.O. Box 4826 Des Moines, IA 50305 Fax: 515-564-4112 Email: DHSAbuseRegistry@dhs.stat e.ia.us	Form Required: Request for Child Abuse Information  Forms may be submitted via Mail, Fax or Email.
KANSAS	Attn: DCF/Child Abuse and Neglect Central Registry P.O. Box 2637 Topeka, KS 66612 Fax: 785-296-8609	Form Required: <a href="http://www.dcf.ks.gov/services/PPS/">http://www.dcf.ks.gov/services/PPS/</a> Documents/OBI 1011 CAN ROI.pdf  Required fee of \$10  Requests should be submitted via Mail/Email/or Fax" Email Address: <a href="mailto:DCF.CentralRegistry@ks.gov">DCF.CentralRegistry@ks.gov</a> Additional Information available online: <a href="http://www.dcf.ks.gov/services/PPS/Pages/Adam-Walsh-Legislation.aspx">http://www.dcf.ks.gov/services/PPS/Pages/Adam-Walsh-Legislation.aspx</a>
KENTUCKY	Department for Community Based Services Records Management Section 275 East Main Street, 3E-G Frankfort, KY 40621  Phone: 502-564-3834 Fax: 502 564-9554	Form Required: None  Requests should be printed on letterhead and submitted via mail or fax.  Additional information may be available online: <a href="https://chfs.ky.gov/agencies/dcbs/Pages/walsh.aspx">https://chfs.ky.gov/agencies/dcbs/Pages/walsh.aspx</a>
LOUISIANA	Louisiana Department of Children and Dept. of Children & Family Services P.O. Box 3318 Baton Rouge, LA 70821  Phone: 225-219-3461 Fax: 225-342-3480 Email: dcfs.childprotectiveservices.d cfs@la.gov	<ul> <li>The following types of clearances must be submitted through the Louisiana Child Abuse and Neglect Clearance System (CANS):         <ul> <li>Clearances for out of state licensed child care facility employees/volunteers (must be requested by the licensed facility and requires a \$25.00 fee)</li> <li>Requests from out of state Child Protection Agencies (no fee at this time)</li> <li>Requests for out of state agencies certifying foster/adoptive parents that serve foster children (no fee at this time)</li> </ul> </li> <li>The CANS system can be accessed through the following link <a href="https://dcfscans.dcfs.la.gov/">https://dcfscans.dcfs.la.gov/</a>.</li> </ul> <li>***Please visit the following website for additional information:     <a href="https://www.dcfs.la.gov">http://www.dcfs.la.gov</a></li>

	Office of Child and Family Services	Agencies Requesting Child Protective Records Research
MAINE	2 Anthony Ave 11 State House Station Augusta, Me 04333-0011 Phone: 207-624-7900 FAX: 207-287-5282	Questions should be directed to Child Protective Intake via by phone 207-626-8620, press 2 or fax 207-287-5065.
MARYLAND	Maryland Department of Human Resources In-Home Services Social Services Administration 311 W. Saratoga Street, Room 553 Baltimore, MD 21201	http://dhr.maryland.gov/documents/Child %20Protective%20Services/1279A%20Back ground%20Clearance%20Form.pdf  Form must be signed and Notarized. Click Here for instructions for completing the form.  Additional information may be available online:
		http://dhr.maryland.gov/child-protective- services/child-protective-services-background- search-the-central-registry/
MASSACHUSETTS	Massachusetts Dept. of Children & Families Attn: Background Record Check Unit 2 Boylston St., 5 <sup>th</sup> Floor Boston, MA 02116 Phone: 857-338-2966 Fax: 617-748-2441	For State/Public Agencies:  No form is required. Submit Request on Agency Letterhead, and include the following information:  • Person's Name  • Date of Birth  • Social Security Number  • Your Contact Info, including: Position, Title, Phone Number and return fax number Submit form via fax.
	Massachusetts Dept. of Children & Families Attn: Background Record Check Unit 2 Boylston St., 5 <sup>th</sup> Floor Boston, MA 02116 Phone: 857-338-2966 Fax: 617-748-2441	For Private Agencies: Submit a signed and notarized release form from the individual to be check. This must include the following:  • First Name • Last Name • Maiden/Alias Name(s) if applicable • Date of Birth • Social Security Number • Massachusetts Address Please also include requestor's contact information and language indicating the agency to whom the results are to be sent.  Additional information may be available online: http://www.mass.gov/eohhs/gov/departments/dcf/request-background-checks.html

### **MICHIGAN**

Division of Child Welfare Licensing Michigan Department of Health and Human Services 235 S Grand Ave, Suite 1305 PO Box 30650

Lansing, MI 48909

Fax: 517-284-9719

Additional Information may be available online: https://www.michigan.gov/mdhhs/0,5885,7-339-73971\_7119\_50648\_48330-180331--,00.html#Section\_1

If you are with a child placing agency working with a foster home or adoptive applicant, mail, email, or fax requests

to:

MDHHS-DCWL-

OSCR@michigan.gov

Requests must come from the child placing agency working with the foster or adoptive applicant. The request must be in writing on the requester's letterhead stating the reason for the request (example: foster home licensing, adoptive placement, etc.) and must include

- 1) Name and title of individual requesting the information.
- 2) Contact information (phone, fax numbers, email address, etc.)
- 3) The following information on individuals for which Central Registry clearance is being requested:
  - Name(s) of individuals.
  - Any previous names.
  - Date of birth.
  - Social Security number.

### **MINNESOTA**

Minnesota Department of Human Services Background Studies Division P.O. Box 64172 St. Paul, MN 55164-0172

Phone: 651-431-6620 Fax: 651-431-7670

### Form Required:

https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7125-ENG

Additional Information may be available online: https://mn.gov/dhs/general-public/backgroundstudies/ MISSISSIPPI

Mississippi State Department

of Human Services Division of Family and Children's Services,

Protection Unit, Child Abuse

Central Registry P.O. Box 352

Jackson, MS 39205-0352

Phone: 601-359-4487

Form Required: Child Abuse/Neglect (CA/N)
Common Central Registry Application (Docu-sign

form)

https://na2.docusign.net/member/PowerFormSigning.aspx?PowerFormId=648d8b01-c287-45f5-9d43-

31f10f7a915f

http://www.dps.state.ms.us/wp-

content/uploads/Authorization-to-Release-MS-

Criminal-Record-Inquiry.pdf

Complete instructions available here:

https://www.mdcps.ms.gov/wp-

content/uploads/2016/05/can ccr app.pdf

Additional Information may be available online:

https://www.mdcps.ms.gov/prevent-child-

abuseneglect/

**MISSOURI** 

Missouri Children's Division

Background

Screen/Investigations Unit

P.O. Box 88

Jefferson City, MO 65103

Phone: 573-751-2330 Fax: 573-751-2607 Form Required:

http://www.mshp.dps.mo.gov/MSHPWeb/PatrolDiv

isions/CRID/documents/821-0353s11-18.pdf

Completed form should be mailed to Missouri

Children's Division Background Screen/Investigations Unit

Additional Information may be available online:

http://dss.mo.gov//cd/

*MONTANA* 

Records Request

DPHHS/CFSD PO Box 8005

Helena, MT 59604-8005

DPHHS/CFSD

ATTN: Records Request

Fax: 406-841-2046

Form Required:

https://dphhs.mt.gov/Portals/85/cfsd/documents/Bac

kgroundChecks/cfs-lic-018releaseofinformation.pdf

Completed form should be signed and notarized and submitted by mail or fax. Incomplete or Illegible

forms will be returned.

Additional Information may be available online:

http://dphhs.mt.gov/CFSD/BackgroundChecks.asp x#149211309-where-to-send-child-protective-

service-background-check-requests

Questions should be emailed to:

ChildFamilyServicesDiv@mt.gov

### **NEBRASKA**

Nebraska Department of Health & Human Services Children & Family Services, Policy Unit Attention Central Registry P.O. Box 95026 Lincoln, NE 68509

Phone: 402 471 9272

Email:

 $\underline{\mathsf{DHHS}.\mathsf{CFSCentralRegistry@nebr}}$ 

aska.gov

Requests are accepted via mail with the form below **OR** requests are accepted via our online portal found here: <a href="https://ecmp.nebraska.gov/DHHS-CR/">https://ecmp.nebraska.gov/DHHS-CR/</a>

### Form Required:

**APS CPS CFS Form** 

Form must be signed, notarized and mailed

### Additional Information may be available online:

http://dhhs.ne.gov/Pages/Abuse-and-Neglect-Central-Registry.aspx

### Please note:

- Requests via fax or e-mail are no longer accepted.
- There is a charge of \$2.50 per background check request with additional fees for payment processing when requests are completed on the online portal.

### NEVADA

Nevada Division of child and Family Services Attn: Child Abuse and Neglect Records Check 4126 Technology Way, 1<sup>st</sup> Floor Carson City, NV 89706 Form Required: Request for Child Abuse & Neglect Screening (linked at the bottom of this page: http://dcfs.nv.gov/Forms/CentralRegistry/)

Form must be signed and mailed to the Nevada Division of Child and Family Services

Additional Information may be available online: http://dcfs.nv.gov/Forms/CentralRegistry/

NEW HAMPSHIRE	NHDCYF Central Registry 129 Pleasant Street Concord, NH 03301	Form Required: <a href="https://www.tn.gov/content/dam/tn/human-services/documents/NH_Form_2202.pdf">https://www.tn.gov/content/dam/tn/human-services/documents/NH_Form_2202.pdf</a>
	Phone: 603-271-8383 Fax: 603-271-4729	Must be signed and notarized
		Form must be mailed, and include a self-addressed stamped envelope.
NEW JERSEY	Department of Children & Families Office of Licensing/CARI Unit P.O. Box 717	Form Required: Out-of-State CARI Check Application (linked at the bottom of this page: <a href="http://www.state.nj.us/dcf/reporting/record/">http://www.state.nj.us/dcf/reporting/record/</a> )
	Trenton, NJ 08625-0717 Phone:: 877-667-9845	<ul><li>Include the following with the form:</li><li>A Copy of your agency license or certification</li></ul>
		<ul> <li>A pre-paid return envelope for each request</li> </ul>
	State Central Registry: 877 NJ ABUSE (877) 652-2873	Form must be submitted via mail, though fax may be approved in emergency situations.
NEW MEXICO	CYFD Protective Services PO Drawer 5160 CRC Unit Room 225 Santa Fe, NM 87502-5160	Form Required: https://cyfd.org/docs/NM Child Abuse and Neglec t Check Form.pdf  Form must be signed, notarized and mailed.
	Phone: 505-827-8400 Email: cyfd.pscriminalreco@state.n m.us	
NEW YORK	Office of Children & Family Services New York State Central Register P.O. Box 4480 Albany, NY 12204 Phone: 518-474-5297 Fax: 518-486-3424	Form Required: Adam Walsh Child Protective and Safety Act of 2006 (multiple languages available); Search "Adam Walsh" in the search box on this page: http://ocfs.ny.gov/main/documents/docsKeyword.asp (Click here for form to request records for potential Child Care providers)  Form must be signed and notarized;
NORTH	NC Division of Social Services 820 S. Boylan Ave. MSC 2408 Raleigh, NC 27699 Attn: RIL	Form Required: <a href="http://info.dhhs.state.nc.us/olm/forms/dss/dss-5268-ia.pdf">http://info.dhhs.state.nc.us/olm/forms/dss/dss-5268-ia.pdf</a>
CAROLINA	Fax: 919-715-6714 Phone: 919-527-6340	https://www2.ncdhhs.gov/info/olm/forms/dss/dss-5277-ia.pdf  Must be signed and submitted via fax or Mail; If mailed, a self-addressed stamped envelope must be included.

No	NORTH DAKOTA	Department of Human Services Children & Family Services 600 E. Boulevard Avenue, Dept 325 Bismarck, ND 58505	Form Required: For the purposes of requesting CPS history for an open investigation, request can be made on agency letterhead and emailed to Jen Grabar at jjgrabar@nd.gov or faxed to her attention at 701-328-3538. Her direct line is 701-328-1863
		Phone: 701-328-1846 Fax: 701-328-3538	For other CA/N Index checks, applicants are required to complete a form:  (https://www.nd.gov/eforms/Doc/sfn00433.pdf) Submitted to dhscfscbc@nd.gov or Fax to: 701-328-0358.
	OHIO	Ohio SACWIS Registry Ohio Dept. of Job & Family Services Office of Families & Children PO Box 183204 Columbus, OH 43218-3204 Phone: 614-752-1298 Fax: 614-728-6726	In order to submit requests, you will need to set up an Ohio ID and log into the state's OSAPS system. This system will assist you in logging your requests and also track the progress of a request.  Link to create an ID and submit request: <a href="https://ap.jfs.ohio.gov">https://ap.jfs.ohio.gov</a> OSAPS Log-in: <a href="https://ap.jfs.ohio.gov/Login.aspx">https://ap.jfs.ohio.gov/Login.aspx</a> OSAPS Q&A: <a href="http://jfs.ohio.gov/ocf/SACWIS-AllegedPerpetratorSearch.stm">https://jfs.ohio.gov/ocf/SACWIS-AllegedPerpetratorSearch.stm</a>
	OKLAHOMA	Email: caniscps@okdhs.org Fax: 405-521-4373	****Please note: Oklahoma does not have a public child abuse registry. Oklahoma State Statutes are very specific as to what Child Welfare Services information maintained by the Oklahoma Department of Human Services can be released. Such records may only be made available

when a current child abuse and neglect

the above information.

investigation is being conducted on an individual(s) by a child protective services agency, a district attorney's office, or a public law enforcement agency. Otherwise a court order rendered in Oklahoma is required for release of child abuse and neglect information. Requests for history for any other purpose, including foster care and placement will be sent a response letter stating

https://	ccrrpublic/	il.okdhs.org/	ccrrpublici/	I/public/
1111103.//	CCII DUDIIC	.UKU  3.U  <u>                                   </u>	CCI I DUDIICI	I/ DUDIIC/

### **OREGON**

Oregon Department of **Human Services Background Check Unit** P.O. Box 14870 Salem, OR 97309

Phone: 503-378-5470 Fax: 503-378-6314 Attn: Adam Walsh Coordinator Email: Adam-Walsh.Oregon@dhsoha

.state.or.us

### Form required:

- Form can be located here: https://apps.state.or.us/Forms/Serve d/me2702.doc
- Form must be type-written and signed.
- E-mail completed forms to Adam-Walsh.Oregon@dhsoha.state.or.us
- If needed or an open CPS investigation, you can send an email to the following email address explaining in the body why you need the information and include name, DOB, etc. for the individual: DHS. Records Request@

dhsoha.state.or.us

PENNSYLVANIA | ChildLine & Abuse Registry Department of Public Welfare, PO Box 8170 Harrisburg, PA 17105

> Phone: (717) 783-6211 Toll-Free: 1-877-371-5422

### **Online Clearance Application:**

https://www.compass.state.pa.us/cwis/public/ho me

Paper submissions of the Pennsylvania Child Abuse History Clearance application will still be accepted for anyone who may not have access to the internet.

### By mail application:

https://www.dhs.pa.gov/Documents/Services/Childr en/Clearances%20and%20Background%20Checks/c hild%20abuse%20english.pdf

**Fee:** \$13, may be submitted as check or money order payable to Department of Public Welfare

# Additional Information may be available online

https://www.dhs.pa.gov/providers/Providers/Pages /Child-Abuse-History-Clearances.aspx

### or here:

https://www.compass.state.pa.us/cwis/public/hom e

### PUFRTO RICO

**Directora Centro Estatal** 

PO Box 194090 San Juan, PR 00919 Phone: 787-625-4900 and Child Abuse

**Register of Convicted Persons for Sexual Offenses** 

http://sor.cjis.pr.gov/

E-mail contacts: Lisa M. Agosto Carrasquillo

Imagosto@familia.pr.gov or Damaris Medina Ramos dmedina@familia.pr.gov

### Form Required:

Puerto Rico Request Form

## RHODE ISLAND No form Required. Print request on letterhead, and include the following:

- A signed release from both the individual and the staff from the agency requesting the clearance. You may send this release on agency letterhead.
- Please also include:
  - o Name
  - o DOB
  - o Previous Rhode Island address(es), if known
  - o Agency check or money order in the amount of \$10.00
    - o Made payable to "General Treasurer State of Rhode Island"
    - Cash and personal checks are not accepted
    - o All requests must be mailed, we do not accept electronic payment

### All requests can be submitted to:

The Department of Children, Youth and Families Attn: Jan Mitchell, Record Center 101 Friendship Street Providence, RI 02903

Phone: 800-742-4453 or 401-528-3842

Fax: 401-528-3480

## **SOUTH CAROLINA**

South Carolina Department

of Social Services Attn: Cashier

1535 Confederate Avenue

PO Box 1520

Columbia, SC 29202

Phone: 803-898-7318

### Form Required:

https://dss.sc.gov/media/1753/dss-form-3072 rev-

may-18.pdf

Fee: \$8 payable by check or money order

Form must be signed and witnessed or notarized and submitted via mail; include a stamped self-

addressed envelope

Additional Information may be available online:

https://dss.sc.gov/content/customers/protection/

cps/cr/index.aspx

### SOUTH DAKOTA

Department of Social Services/CPS 700 Governors Drive Pierre, SD 57501

Phone: 605-773-3227 Fax: 605-773-6834 Contact: Nicole LeBeau

Email:

Nicole.lebeau@state.sd.us

Form Required: Contact by phone for instructions.

Signed, Witnessed and Notarized release required. Original form must be submitted by mail.

### *TFNNFSSFF*

### Email:

EI DCS CPS CentralRegistryC heck@tn.gov

**Form Required:** Tennessee DCS Database Search Results form Available on this page: https://files.dcs.tn.gov/forms/0741.pdf

### Include the following:

- Cover Letter on agency letterhead stating the reason for the request
- Attached "Tennessee" DCS Database Search Results" form completed in Word Format
- Copy of current agency license (if CPA/private adoption agency). For independent home study writers, include proof or verification noting your approval as a home study writer.
- A copy of the person's signed "Authorization to Release Information" specifically stating information is to be shared from the Tennessee Department of Children's Services with your agency (this is a form from your agency, not Tennessee)

The requested information must be sent via email; the form must be submitted in word format (.doc, .docx)

Please include "Out of State Request" in the subject line, along with the name of the requesting state.

Additional Information may be available online: <a href="https://www.tn.gov/dcs/contact-us/records-management-division/cps-history.html">https://www.tn.gov/dcs/contact-us/records-management-division/cps-history.html</a>

TEXAS	CBCU TX Abuse Neglect BGC, M/C 121-7 PO Box 149030 Austin, TX 78714 Phone: 1-800-645-7549 Fax: 512-339-5829 Email: TXAbuseNeglectBGC@dfps.st ate.tx.us	Central Registry requests from an out-of-state protective service agency to assist an open investigation or other case open action must be faxed on your state agency's letterhead to Statewide Intake: 800-647-7410 or 512-339-5900.  Form must be notarized and submitted via fax  An individual may use form 2970 to request a Texas Department of Family and Protective Services Central Registry Abuse and Neglect check on him or herself: <a href="http://www.dfps.state.tx.us/Application/Forms/showthie.aspx?NAME=F-500-2970.pdf">http://www.dfps.state.tx.us/Application/Forms/showthie.aspx?NAME=F-500-2970.pdf</a>
UTAH	Department of Human Services Division of Child & Family Services Attn: Child Abuse Background Screening 195 North 1950 West Salt Lake City, UT 84116 Phone: 801-538-4466 Fax: 801-538-3993	Form Required: <a href="https://dcfs.utah.gov/wp-content/uploads/2019/02/CHILD-ABUSE-CHECK-CONSENT-FORM.pdf">https://dcfs.utah.gov/wp-content/uploads/2019/02/CHILD-ABUSE-CHECK-CONSENT-FORM.pdf</a> Please also include a copy of one of the following photo identifications:  • Valid Driver's License • State Identification Card • Passport ID  Form should be mailed.
	Additional Information may be	available online: http://dcfs.utah.gov/
VERMONT	Child Protection Registry Self-Inquiry Department of Children and Families, Osgood 3 103 South Main Street Waterbury, VT 05671 Phone: 802-871-6474 Fax: 802-241-3301	Form Required: https://dcf.vermont.gov/sites/dcf/files/Protection/docs/CPR-Selfcheck.pdf  Mail completed form and self-addressed stamped envelope  Additional Information may be available online http://dcf.vermont.gov/protection/registry/self-check

VIRGINIA	Virginia Department of Social Services Office of Background Investigations – Search Unit 801 East Main Street, 6 <sup>th</sup> Floor Richmond, VA 23219	Form Required: http://www.dss.virginia.gov/files/division/licensin g/background_index_childrens_facilities/founded cps_complaints/032-02-0151-12-eng.pdf  Fee: \$10, must be money order, company/business check or cashier's check made payable to Virginia Department of Social Services  Form must be mailed
WASHINGTON	Department of Children, Youth, and Families 500 First AV South, Suite 501 Seattle, WA 98104-9968 Email: CANhistorychecks@dcyf.wa.gov  Phone: 206-3341-7938 Fax: 206-341-7930  Mail form with fee to: Department of Children, Youth, and Families ATTN: FISCAL PO Box 40970 Olympia, WA 98504-0970	Form Required: Washington State Child Abuse and Neglect Founded Findings Request from Another State (form DCYF #23-041) https://www.dcyf.wa.gov/safety/foundedfindings -externalrequestors  Fee: \$20, check payable to Department of Children, Youth, and Families (DCYF) *Form must be typewritten and signed. Any handwritten or incomplete forms will be returned. *Completed forms must be submitted by mail.  Requests from State Child Protective Service Investigators: For a Public Child Welfare agency requesting CA/N history as part of a CPS or Child Welfare investigation, the request must be submitted on their state agency's letterhead and include language indicating the subjects are part of an ongoing investigation. For specific instructions, click: https://www.dcyf.wa.gov/safety/foundedfindings-externalrequestors  Email the CA/N history request to CANhistorychecks@dcyf.wa.gov or Fax to 206-341-7930
WEST VIRGINIA	Bureau of Children and Families 350 Capitol Street, RM 691 Charleston, WV 25301 Phone: 304-558-7980	Form Required: https://dhhr.wv.gov/bcf/Providers/Documents/A UTHORIZATIONRELEASERECORDCHECKFOSTERAD OPTONLY.pdf  Child Care Agencies use this form: https://dhhr.wv.gov/bcf/Providers/Documents/ AU THORIZATIONRELEASERECORDCHECK.pdf  Form should be filled out using blue ink; original should be submitted via mail to

address listed on form.

WISCONSIN	Department of Safety and Permanence	Form Required: DCF-F-5065-E Request for Child Protective Services Background Check for
	201 E. Washington Street Madison, WI 53703	Certain Purposes.
	Email: <u>CWBckgrdRequests@wiscons</u> <u>in.gov</u> Fax: (608) 226-5521	Search for Form #5065 on this page to access form in English, Hmong, or Spanish: <a href="https://dcf.wisconsin.gov/forms">https://dcf.wisconsin.gov/forms</a> Or click here for the direct link to the English version: <a href="https://dcf.wisconsin.gov/files/forms/doc/5065.d">https://dcf.wisconsin.gov/files/forms/doc/5065.d</a>
		oc x  Form can be emailed or faxed. Handwritten signatures are required.
WYOMING	Department of Family Services Central Registry 2300 Capitol Ave, 3 <sup>rd</sup> Floor Cheyenne, WY 82002	Additional information and forms available on their website: <a href="https://dfs.wyo.gov/about/central-registry/">https://dfs.wyo.gov/about/central-registry/</a>

dates of birth, and social security numbers for all individuals being screened

Application should be submitted by mail.

Additional Information may be available online: https://sites.google.com/a/wyo.gov/dfsweb/central-registry