

# **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.

Please Note: We maintain the listing for child placement purposes, not for employment.

STATE	CONTACT INFO	REQUIREMENTS/PROCEDURES
ALABAMA	State of Alabama, Dept. of Human Resources, Child Abuse & Neglect Registry, 50 Ripley Street Montgomery, AL 36130  Phone: (334) 242-9500 Fax: (334) 242-0939	Alabama Dept. of Human Resources Child Abuse/Neglect Central Registry Clearance Form (1598): https://dhr.alabama.gov/wp- content/uploads/2019/07/form1598.p df  Instructions to complete form 1598: https://dhr.alabama.gov/wp- content/uploads/2019/07/InstructionsforC entralRegistryForm.pdf  Original copy required, must be mailed via US Mai, UPS or Fed Ex.  Additional info can be found here: https://dhr.alabama.gov/child-protective- services/central-registry-clearance/ https://dhr.alabama.gov/child-protective- services/central-registry- clearance/?hilite=1598
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/childpro tection/d efault.aspx
AMERICAN SAMOA		Their registry is local and not available online. You must e-mail the agency to request the form  Emails for the CPS unit to request the check are:  CPS Branch Manager, Tufa Avegalio CFSD: Tufanua Avegalio: tavegalio@dhss.as

		Or CPS Program Coordinator Omeka "Max" Gaisoa: jezeniahhoo.com
ARIZONA	Arizona Department of Child Safety Central Registry P.O. Box 6030, Site Code C010-20 Phoenix, AZ 85005-6030 Fax: (833)856-8925 Email: DCSCentralRegistry@azdcs.gov (preferred method). For questions, contact Abe Vicente 602-513-2032 (Abraham.Vicente@azdcs.gov).	Form Required: If you live in Arizona and are required to conduct this check for another state, please contact FHLAWA@azdcs.gov or call 602-255-2801.  Form CSO-1131A https://dcs.az.gov/content/cso-1131a  To be used for placing children Form DCS-1058A https://dcs.az.gov/content/cso-1058a  To be used for employment purposes Form DCS-1083A https://dcs.az.gov/content/dcs-1083a please submit DCS-1083  ALL Adam Walsh requests require an email address. Incomplete or unsigned requests cannot be processed and will be returned.  Additional info can be found online here: https://dcs.az.gov/  Please allow 10-14 business days prior to sending a status update request. Adam Walsh requests requires an email address and CURRENT mailing address. Incomplete or unsigned requests cannot be processed and will be returned. Emailed request must be sent as a PDF attachment. Images, screenshots and other formats may be
ARKANSAS	Arkansas Child Maltreatment Central Registry P.O. Box 1437, Slot S 566 Little Rock, AR 72203	rejected.  Submitting an Arkansas Child Maltreatment Central Registry Background Check Request Directions:

#### **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: BCIA 4057 Child Abuse
Central Index Inquiry Request for Out of
State Foster Care & Adoption Agencies

Original signature required, form can only be submitted by mail.

\$15 Processing fee

More information available online: <a href="http://oag.ca.gov/childabuse/outofstatefosteradopt">http://oag.ca.gov/childabuse/outofstatefosteradopt</a> ion

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

Phone: (303) 866-7436 (

866-4614

If you live outside of Colorado but are required to conduct this check in your state:

Complete, print and sign a Child Abuse and Neglect Records Check form.

https://drive.google.com/file/d/1BsE\_b0 iNZb13SBaa54Vl7iN3UOzT3fWa/view

This request form generates ONE Results
Letter. Results from this request are
released to the person/agency/facility
listed in the Results Letter release section
of the form. If you want a Results Letter
sent to the person being background
checked AND another person, a second
form and fee must be submitted.

- The child abuse and neglect background check process can take up to 30 business days, so please plan accordingly. Requests are processed in the order they're received
- A \$35 NONREFUNDABLE fee is required for each individual Trails abuse/neglect background check request. This fee only produces one Results Letter.

		o Include a check or money order with your request. Cash or credit card payments are not accepted. Submitting the incorrect fee will delay the processing of your request.  o The check or money order must be payable to the CDHS, Background Investigation Unit (BIU).  Mail completed form(s) and payment to: Colorado Department of Human Services Division of Early Care and Learning Attn: Trails Background Investigation Unit (BIU)  1575 Sherman Street, Garden Level Denver, CO 80203-1714
CONNECTICUT	Department of Children and Families Careline 505 Hudson Street Hartford, CT 06106 E-mail:  DCF.BackgroundCheck@ct.gov  Phone: 1-800-842-2288 option #6 Fax: 860-560-7071	If needed for Foster Care or Adoption use Form 3033: <a href="https://portal.ct.gov/-/media/DCF/Policy/NEW-fillin-Forms/DCF-3033-O.pdf">https://policy/NEW-fillin-Forms/DCF-3033-O.pdf</a> Additional background screening info can be located here: <a href="https://portal.ct.gov/DCF/Background-Checks/Home">https://portal.ct.gov/DCF/Background-Checks/Home</a>
DELAWARE	DSCYF, OCCL Criminal History Unit 1825 Faulkland Road Wilmington, DE 19805 Phone: 302-892-5800 Fax: 302-633-5191	Form Required:  All checks must be submitted through the Delaware Child Protection Registry Request Web Portal. They longer accept requests through email, fax, spreadsheet or postal mail.  https://childprotectionregistry.delaware .gov  A signed consent is required for each Child Protection Registry portal request. The consent form can be found on the web portal homepage under the blue registration buttons to the right  Further information about the Child

Protection Registry can be located at:

		https://kids.delaware.gov/fs/fs_cpr.shtml
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: https://cfsa.dc.gov/sites/default/files/dc/ sites/cfsa/publication/attachments/CPR C heck Application July2020 childwelfare. pdf (Child Welfare purposes) Submission Instructions & Application: https://cfsa.dc.gov/sites/default/files/dc/ sites/cfsa/publication/attachments/CPR S ubmission Instructions 04-22- 20 English.pdf More information available online: https://cfsa.dc.gov/publication/cpr- request-application-child-welfare  Note: Effective April 1, 2020, paper applications are not being accepted while DC Government is on telework status. CPR check applications must be submitted electronically.More information available online:https://cfsa.dc.gov/publication/cpr -ion-child-welfareNote: Effective April 1, 2020, paper applications are not being accepted while DC Government is on telework status. CPR check applications must be submitted electronically.
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@my flfamilies.com	Form Required: https://www.myflfamilies.com/service- programs/abuse- hotline/docs/Adam%20Walsh%20Request %20Form.pdf  Form used for Employment purposes: https://www.myflfamilies.com/service- programs/background- screening/docs/Child%20Welfare%20Record s%20Request%20for%20Employment.pdf  *Submit via Fax or email

# GEORGIA

Additional information may be available here:

https://www.myflfamilies.com/service-programs/background-screening/

Background Screening Help Desk:

888-352-2849

TTY: 711

Georgia Dept of Human Services Attn: Child Protective Services Screening 2 Peachtree St. NW, 18 Floor Atlanta Georgia 30303

For questions send e-mail to: georgiaadamwalshcheck@dh s.ga.gov

\*Note: Effective February 1,
2020, The Adam Walsh
application process was amended
which will now require that all
applications be submitted as a
PDF document. Applications
submitted as w word
document will no longer be
accepted.

Screening Request Form/Application: https://dfcs.georgia.gov/document/document/submit-screening-request-form/download

Submit the purpose of request on agency letterhead, along with the signed CPS application for each individual (18 years or older) to be screened. Send one application per person to

GeorgiaAdamWalshCheck@dhs.ga.gov.
Faxed or mailed in requests will not be accepted. Please ensure all applications are typed except for the required signature which must be a handwritten signature.

For request related to open or on-going investigations, complete as much information as possible on the application to ensure a thorough screening can be completed. 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, all boxes (with the exception) of the current household members are required to be completed. If the purpose of the request is for adoption of any kind and or foster care, ensure the form is signed by the potential applicant(s). Please include DOB and complete SSN. Please ensure that you provide the purpose (employment, adoption, foster care, investigation, home study, etc.) of the request and identifying information on your state agency letterhead and submit all documents together.

GUAM	Bureau of Social Services	Form Required: None
JOAN	Administration	Print request for information on
	Department of Public Health &	letterhead.
	Social Services	Signed release required.
	194 Hernan Cortez Avenue	Send requests to Contact: Corrine
	Hagatna, Guam 69610	Buendicho:
	,	corrine.buendicho@dya.guam.gov
	Phone: 671-475-2653 or 671-475-	
	2672	
	Fax: 671-477-0500	
HAWAII	Department of Human	Form Required: Consent to Release
	Services	Information from the Child Protective
	Child Welfare Services	Services System Central Registry
	Section	
	420 Waiakamilo Road, Suite	Original form must be mailed.
	300A	
	Honolulu, HI 96817	Additional Information
	Phone: 808-832-0609	
	Fax: 808-832-0628	available online:
		http://humanservices.hawaii.gov/ssd/backg roundch
		eck/
IDAHO	Idaho Department of Health &	Website: https://chu.dhw.idaho.gov
IDANO	Welfare	Website: https://ena.anw.idano.gov
	Criminal History Unit	Form: The form is the authorization from
	Attn: CWIS	the
	P.O. Box 83720	subject of the search to complete the Idaho
	Boise, ID 83720	Child
	50.30, 15 03720	Protection Registry Check.
	Phone: (208) 332-7990	Trocedion negistry enects.
	Fax: (208) 332-7991	Form:
	crimhist@dhw.idaho.gov	https://chu.dhw.idaho.gov/documents/Idah
	<u>erminote anwinautorgov</u>	o CP Registry Check Request Form.pdf
	Contact: Fernando Castro,	o or registry eneck request rormipar
	Program	Go to: Instructions
	Supervisor	https://chu.dhw.idaho.gov
	Email:	- interport of an artifacture and a second of a second
	castrof@dhw.idaho.gov	Is the Form Required? Yes
	<u></u>	
		Signed release required? Yes – signed and
		notarized
		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

accompanies the request.

Note: Processing fees are reimbursable under Title IV-E administrative expenses. **ILLINOIS** Department of Family & Form Required: Form CFS 689 **Children Services** https://www2.illinois.gov/dcfs/aboutus/no tices/Documents/cfs 689 authorization f 406 E. Monroe Street, Station 30 or background check for programs not Springfield, IL 62701 licensed by dcfs (fillable).pdf#search=689 Phone: 217-557-0758 Fax: 217-782-3991 CFS689 forms will only be accepted electronically, via our dedicated email address: DCFS.689Background@Illinois.gov Complete all applicable fields on the form, clearly and legibly. Forms will not be processed if deemed illegible. (typed forms are preferred) The form must be signed (hand-written) and dated within one year of the process date. (typed signatures are not accepted) In order to apply our clearance stamps and process your form, it must be submitted as a PDF attachment with no encryption. The PDF must be an external attachment (using the paperclip icon) and not imbedded into the body of the email. Attach a maximum of 20 PDF file-formatted CFS689 forms per email. Please combine multiple forms (up to 20) into 1 PDF document. If there is not DCFS history to be reported, you will receive your CFS689 form back via email, with the applied "NO PRIORS" clearance stamp. If there is a POSITIVE HIT, you will receive an email notifying you that your results will be returned via standard mail or fax. Return Agency information is required. Please complete ALL agency fields in lower, left-hand corner. Our processing time fluctuates greatly

throughout the year as it is based on the number of forms we receive. Please do NOT

resubmit your request.

INDIANA	Indiana Dept. Of Child Services, COBCU 302 W. Washington St. Room E306, MS08 Indianapolis, IN 46204  Fax: 317-234-4633 Email: background.checkunit@dcs.i n.gov	Requests for CPI/CPS history checks must be submitted via Indiana's online portal.  For updates and implementation of this new portal and information specific to CPI/CPS History Check Requests, please visit the IN DCS Background Check Webpage at: https://www.in.gov/dcs/3928.htm  Additional information may be available online: http://www.in.gov/dcs/2363.htm
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: <a href="https://dhs.iowa.gov/sites/default/files/470">https://dhs.iowa.gov/sites/default/files/470</a> <a href="https://dhs.iowa.gov/sites/default/files/470">-3301.pdf?070520191428</a> Complete a separate form for each person for whom info is requested. 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: http://www.dcf.ks.gov/servic es/PPS/Documents/OBI_1011CAN_ROI.pdf  Required fee of \$10  Requests should be submitted via Mail/Email/or Fax" Email Address: DCF.CentralRegistry@ks.gov  Additional Information available online: http://www.dcf.ks.gov/services/PPS/Pag es/Adam- Walsh-Legislation.aspx
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: Form DPP- 157 Background Check Request for Foster or Adoptive Applicants and Adolescent or Adult Household Members https://chfs.ky.gov/agencies/dcbs/Documents /dpp157backgroundcheckfosteradoptive.pdf  Form DPP-159 Background Check Request for Relative and Fictive Kin Caregivers, or Adolescent and Adult Household Members https://chfs.ky.gov/agencies/dcbs/Docume

nts/dpp159backgroundcheckrelativefictive

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		kin.pdf
		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	The following types of clearances must be submitted through the Louisiana Child Abuse and Neglect Clearance System (CANS): Clearances for out of state licensed child care facility employees/volunteers (must be requested by the licensed facility and requires a \$25.00 fee) Requests from out of state Child Protection Agencies (no fee at this time) Requests for out of state agencies certifying foster/adoptive parents that serve foster children (no fee at this time) The CANS system can be accessed through the following link <a href="https://dcfscans.dcfs.la.gov/">https://dcfscans.dcfs.la.gov/</a> .  ***Please visit the following website for additional information:
		http://www.dcfs.la.gov
MAINE	Office of Child and Family Services  2 Anthony Ave 11 State House Station Augusta, Me 04333-0011 Phone: 207-624-7900 FAX: 207-287-5282	Requests must be submitted by email to:  ADAMWALSH.DHHS@maine.gov  Request must be made on agency letterhead  Request must include requestors name, job title, phone number, fax/mail/email address  Individual(s) to be searched name(s), aliases, and DOB(s)  Must cite Adam Walsh Child Protection
	Questions should be directed to Child Protective Intake via by phone 207-626-8620, press 2 or fax 207-287-	and Safety Act of 2006 in the request Results will be emailed back within 5-10 business days.  Please note, responses will ONLY include: 'This person does not have any substantiated findings of Child Abuse and Neglect in the State of Maine'

The online portal for employment checks (non-Adam Walsh requests) is....

maine.gov/online/cpsbackgroundcheck

or 'This person has substantiated findings of Child Abuse and Neglect in the State of Maine'.

MARYLAND	Maryland Department of	Form Required:
	Human Resources	http://dhr.maryland.gov/documen
	In-Home Services	ts/Child%20Protective%20Services/
	Social Services	1279A%20Background%20Clearanc
	Administration	<u>e%20Form.pdf</u>
	311 W. Saratoga Street,	Form must be signed and
	Room 553	Notarized. <u>Click Here</u> for
	Baltimore, MD 21201	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	Required Form:
	Children & Families Attn:	https://www.mass.gov/files/documents/20
	Background Record Check	20/02/24/Adam%20Walsh%20Form%20%28
	Unit	<u>rev%2002.24.2020%29_0.pdf</u>
	2 Boylston St., 5 <sup>th</sup> Floor	
	Boston, MA 02116	Additional information may be available
		Additional information may be available online:
	Phone: 857-338-2966	
	Fax: 617-748-2441	http://www.mass.gov/eohhs/gov/departments/dcf/ request-background-checks.html
MICHIGAN	Division of Child Welfare	Additional Information may be available
WIICHIGAN	Licensing	online:
	Michigan Department of	https://www.michigan.gov/mdhhs/0,58
	Health and Human Services	85,7-339-73971 7119-180331
	235 S Grand Ave,	,00.html#Section 1
	Suite 1305	Journal I
	PO Box 30650	Requests must come from the child
	Lansing, MI 48909	placing agency working with the foster or
	Fax: 517-284-9719	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
	If you are with a child placing	include
	agency working	1) Name and title of individual
	with a foster home or adoptive	requesting the information.
	applicant,	2) Contact information (phone, fax
	mail, email, or fax requests to:	numbers, email address, etc.)
	MDHHS-DCWL-	3) Name of the individuals you are
	OSCR@michigan.gov	requesting to be cleared.
		4) The individual your agency is
		requesting to be cleared must

complete the **Central Registry** 

		Clearance Request - DHS-1929 form that provides authorization for MDHHS to complete the requested clearance. All submissions must include the applicants' valid driver's license. 5) The attached 1929(s) must accompany the agency request.
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: <a href="https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7125-ENG">https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7125-ENG</a> Additional Information may be available online: <a href="https://mn.gov/dhs/general-public/background-studies/">https://mn.gov/dhs/general-public/background-studies/</a>
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/Power FormSigni ng.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 Department of Health and Senior Services Family Care Safety Registry PO Box 570 Jefferson City, MO 65102-0570 Phone: 866-422-6872 (8:00 a.m. – 3:00 p.m. weekdays)	The Family Care Safety Registry (FCSR) was created to screen caregivers for placement in a child-care, elder-care, mental health, or personal-care setting. An FCSR screening checks seven Missouri-only databases, and includes the Central Registry for Child Abuse and Neglect. The FCSR can be used to screen members of a family caring for foster

Fax: 573-522-6981 children. The individual must be registered Email: fcsr@health.mo.gov before they can be screened for placement as a caregiver. A fee is collected at time of registration. Learn more about caregiver registration and how to request a Family Care Safety Registry screening at: https://health.mo.gov/safety/fcsr/about.php. \*\*The FCSR cannot be used for child abuse investigation inquiries. Records Request DPHHS/CFSD **MONTANA** PO Box 8005 Form Required: Helena, MT 59604-8005 https://dphhs.mt.gov/cfsd/BackgroundChecks Completed form should be signed and DPHHS/CFSD notarized and submitted by mail or fax. ATTN: Records Request Fax: Incomplete or Illegible forms will be 406-841-2046 returned. Questions should be emailed to: ChildFamilyServicesDiv@m t.gov Nebraska Department of Requests are accepted via mail with the **NEBRASKA Health & Human Services** form below OR requests are accepted via Children & Family Services, our online portal found here: Policy Unit https://ecmp.nebraska.gov/DHHS-CR/ **Attention Central Registry** P.O. Box 95026 Form Required: Lincoln, NE 68509 **APS CPS CFS Form** Phone: 402 471 9272 Form must be signed, notarized and mailed Email: DHHS.CFSCentralRegistry@nebr Additional Information may be available aska.gov online: http://dhhs.ne.gov/Pages/Abuseand-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, 1st Floor Carson City, NV 89706	Form Required: Request for Child Abuse & Neglect Screening http://dcfs.nv.gov/uploadedFiles/dcfsnvg ov/content/Policies/CW/1607B Request for Child Abuse and Neglect Screening ADA(2).pdf  Type or print clearly on the correct request form. Please ensure the form is completed in its entirety as incomplete and/or illegible forms may delay processing time.  Email the completed form to DCFS-CANS@dcfs.nv.gov  For additional questions or if a response is not received within 15 business days of the request, please email DCFS-CANS@dcfs.nv.gov or call (775)684-7941.  Additional Information may be available online: http://dcfs.nv.gov/Forms/CentralRegist ry/
NEW	NHDCYF Central Registry 129	Form Required: Form 2501-Third Party
HAMPSHIRE	Pleasant Street	Name Search Authorization
	Concord, NH 03301	Must be signed and notarized
	Phone: 603-271-4259	· ·
	Fax: 603-271-4729	Form must be mailed, and include a self-
NEW JERSEY	Department of Children &	addressed stamped envelope.  Submit requests through:
INLVV JERSET	Families	www.njportal.com/dcf/cari Click on the Out
	Office of Legal Affairs/CARI Unit	of State "File an Out of State CARI" button. You will need the following
	P.O. Box 717-4 <sup>th</sup> Floor Trenton, NJ 08625-0717	information to complete the application:
		Requesting agency contact information - name,
	Phone: : 855-744-4913	phone number, email address, and physical address.
	State Central Registry:	
	877 NJ ABUSE (877) 652-2873	
	https://www.nj.gov/dcf/reporting	

# **NEW MEXICO**

**CYFD** 

Protective Services PO Drawer 5160 CRC Unit Room 225 Santa Fe, NM 87502-5160

Phone: 505-827-8400

Email:

cyfd.pscriminalreco@state.n

m.us

Due to the Coronavirus pandemic in New Mexico at this time, CYFD is not receiving physical mail - Please send all applications and requests via email.

### Adam Walsh Abuse and Neglect Checks

- For CPS History use the PDF Named Disclosure of Confidential Information and send to SCI.LEReports@state.nm.us.
- For Out of State Foster and Adoption use PDF Named the NM Abuse and Neglect Form and Email to CYFD.PSCriminalReco@state.nm.us
- For Employment please email CYFD.BCU@state.nm.us and use their form. 2020 NM ABUSE NEGLECT CHECK **REQUEST** [DOC]

**New Forms and Additional Information** Located Here: <a href="https://cvfd.org/for-">https://cvfd.org/for-</a> providers/info-and-manuals

#### **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

# **NORTH** CAROLINA

NC Division of Social Services 952

Old US Hwy 70, Black Mountain,

NC 28711 Attn: RIL

Fax: (984) 285-7159, Attn: RIL

Phone: 828-232-3160

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/docsK eyword.asp

For child care providers:

https://ocfs.ny.gov/forms/ocfs/OCFS-7076.dotx

Form must be signed and notarized;

Form Required:

https://policies.ncdhhs.gov/divisional/social -services/forms/dss-5268-responsibleindividuals-list-ril-information-

request/@@display-file/form file/dss-5268-

ia.pdf/

Must be signed and submitted via fax or Mail; If mailed, a self-addressed stamped envelope must be included.

**NORTH DAKOTA** 

Department of Human

Form Required: For the purposes of requesting

ОНІО	Services Children & Family Services 600 E. Boulevard Avenue, Dept 325 Bismarck, ND 58505  Phone: 701-328-2316 Fax: 701-328-3538  Ohio SACWIS Registry	CPS history for an open investigation, request can be made on agency letterhead and emailed to <a href="maileo.com/dhscfs.cani@nd.gov">dhscfs.cani@nd.gov</a> or fax to: 701-328-3538  For other CA/N Index checks, applicants are required to complete a form: ( <a href="https://www.nd.gov/eforms/Doc/sfn00433.pd">https://www.nd.gov/eforms/Doc/sfn00433.pd</a> f) Submit to <a href="maileo.com/dhscfscbc@nd.gov">dhscfscbc@nd.gov</a> or Fax to: 701-328-0358.  In order to submit requests, you will need to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up an Ohio ID and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state's complete to set up and log into the state in the state
	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	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: https://ap.jfs.ohio.gov  OSAPS Log-in: https://ap.jfs.ohio.gov/Login.aspx  OSAPS Q&A: http://jfs.ohio.gov/ocf/SACWIS-AllegedPerpetratorSearch.stml
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 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 the above information.  https://ccrrpublicjl.okdhs.org/ccrrpublicjl/public/
OREGON	Oregon Department of	•Form can be located here:

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.o

r.us

# **PENNSYLVANIA**

**ChildLine and Abuse Registry** 

Pennsylvania Department of Human Services PO Box 8170 Harrisburg, PA 17105-8170

Phone: 717-783-6211 or toll free 1-877-371-5422

•To Obtain Clearances for emergency placements. contact ChildLine at 1-800-932-0313 Note: Only children and youth agencies from other states can make an emergency request for placement clearances.

# https://apps.state.or.us/Forms/Served/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.RecordsRequest@dhsoha.state.or.u

<u>s</u>

The Pennsylvania Child Abuse History clearance can be submitted and paid for online through the Child Welfare Information Solution (CWIS) self-service portal.

Submitting an application online allows individual applicants to receive their results through an automated system that will notify them once their results have been processed. Applicants will be able to view and print their results online.

Paper submissions will still be accepted for anyone who may not have access to the internet. Please note, results will be received more quickly if applied for electronically through the self-service portal.

Form CY113:

http://www.keepkidssafe.pa.gov/cs/groups /webcontent/documents/form/s\_001762.pd f

Cost: \$13

Additional Info:

http://www.keepkidssafe.pa.gov/resources/clearances/pachildhistory/index.htm

#### **PUERTO RICO**

Directora Centro Estatal PO

Box 194090

San Juan, PR 00919 Phone: 787-625-4900 Register of Convicted Persons for Sexual Offenses and Child Abuse 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**

The Department of Children, Youth and Families Attn: Natasha House, Records **Center Supervisor** 101 Friendship Street Providence, RI 02903

Phone: (401) 528-3823

E-mail:

Natasha.House@dcyf.ri.gov

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.

Please also include:

- Name
- DOB
- Previous Rhode Island address(es), if
- Payment in the amount of is \$10 can be sent electronically via: https://www.ri.gov/DCYF/clearancerequ est/ [nam04.safelinks.protection.outlook.co
- Or agency check or money order made payable to "General Treasurer State of Rhode Island". Cash and personal checks are not accepted.
- There is no charge for state agencies to request Adam Walsh daycare clearance requests.
- Scan signed requests/releases on letterhead to: Natasha.House@dcyf.ri.gov

# **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/prot ection/ cps/cr/index.aspx

## **SOUTH DAKOTA**

Department of Social Services Office of Licensure & Accreditations, 910 E Sioux Ave, Pierre, SD 57501

Phone: 605-773-3612 Fax: 605-Fax: 773-7294

#### Form Required:

http://www.centerforchildwelfare.org/ChildP rotective/2020 DSS SD Agency Screening F orm.pdf

Submit requests by mail to: DSS-Division Child Protection, 910 E Sioux Ave

Pierre, SD 57501-2291 or email: DSSCRS@state.sd.us

		Central Registry of Child Abuse & Neglect Information Brochure <a href="https://dss.sd.gov/formsandpubs/docs/ABUSE/CentralRegistry.pdf">https://dss.sd.gov/formsandpubs/docs/ABUSE/CentralRegistry.pdf</a>
TENNESSEE	Email: EI DCS CPS CentralRegistryC heck@tn.gov	Form Required: Tennessee DCS Database Search Results form Available on this page: <a href="https://files.dcs.tn.gov/forms/0741.pdf">https://files.dcs.tn.gov/forms/0741.pdf</a> Submit for EACH applicant for whom you are requesting a search:  A cover letter (notice) on your agency's letterhead stating the reason you are requesting a central registry search. Attached "Tennessee DCS Database Search  Page lets" form completed in Word formet.
		Results" form completed in Word format. Copy of current agency license (if a CPA/private adoption agency). For independent home study writers, please 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 Tennessee Department of Children's Services with your agency. NOTE: This is NOT a TN form. This is a form that your agency should have, giving permission for "your" agency to "request" the information and "our" agency (TN Dept. of Children's Services) to "release" any CPS history information to "you". 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

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: 801-538-4100 or 801-538-4171 Fax: 801-538-3993	request a Texas Department of Family and Protective Services Central Registry Abuse and Neglect check on him or herself:  http://www.dfps.state.tx.us/Application/Forms/sho wFile.aspx?NAME=F-500-2970.pdf  Form Required: https://dcfs.utah.gov/wp-content/uploads/2019/09/ChildAbuseCentralRegistryRequest-0919.pdf  Please also include a copy of one of the following photo identifications:  •Valid Driver's License •State Identification Card •Passport ID  E-mail form to: dcfscentralregistry@utah.gov  If unable to e-mail, the completed form can be faxed or mailed to the fax number/address on the left  Additional Information may be available online: http://dcfs.utah.gov/
VIRGIN ISLANDS	Vermont Department for Children & Families Residential Licensing & Special Investigations 280 State Drive HC1 N., Bldg. B Waterbury, VT, 05671-1030 Phone: 802-241-0873 Fax: 802-241-0919 joann.berno@vermont.gov  Department of Human Services Children & Family Services 1303 Hospital Ground Knud Hansen	Form Required:  Please send your request on your Agency's letterhead with name, alias' and DOB to:     joann.berno@vermont.gov or fax it to: 802-241-0919  Form Required: Email a request on letterhead to: Natalie.lewis@dhs.vi.gov
VIRGINIA	Complex Building A St. Thomas, VI 00802  Phone: (340) 473-5794  Virginia Department of Social Services Office of Background	Form Required: <a href="http://www.dss.virginia.gov/files/division/licensin">http://www.dss.virginia.gov/files/division/licensin</a>
	Investigations – Search Unit	g/background index childrens facilities/f

	801 East Main Street, 6 <sup>th</sup> Floor Richmond, VA 23219	ounded 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 1310 Jefferson ST SE P.O. Box 40993 Olympia, WA 98504 Email: canhistorychecks@dcyf.wa.gov Phone: 1-800-998-3898 Fax: 1-206-341-7930  Mail form with fee to: Department of Children, Youth, and Families ATTN: FISCAL PO Box 40970 Olympia, WA 98504-0970  Check the website for our new portal to submit electronic CA/N history check requests. The new portal is expected to go live in early 2021.  https://www.dcyf.wa.gov/safety/can-founded-findings/history-checks	Form Required: Washington State Child Abuse and Neglect Founded Findings Request from Another State (form DCYF 23-041) https://www.dcyf.wa.gov/safety/can- founded-findings/history-checks  Fee: \$20, check payable to Department of Children, Youth, and Families (DCYF) *Form must be typed, not handwritten, 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 the 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/can- founded-findings/history-checks Email requests 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/Docum ents/AUTHORIZATIONRELEASERECORDCH ECKFOSTERADOPTONLY.pdf  Child Care Agencies use this form: https://dhhr.wv.gov/bcf/Providers/Docum ents/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 201 E. Washington Street Madison, WI 53703 Email: <u>CWBckgrdRequests@wiscons</u> <u>in.gov</u> Fax: (608) 226-5521	Form Required: DCF-F-5065-E Request for Child Protective Services Background Check for Certain Purposes. 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.doc">https://dcf.wisconsin.gov/files/forms/doc/5065.doc</a> x Form can be emailed or faxed. Hand-written 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: <a href="https://sites.google.com/a/wwo.gov/dfsweb">https://sites.google.com/a/wwo.gov/dfsweb</a>
		https://sites.google.com/a/wyo.gov/dfsweb/central-registry