

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 centersupport@usf.edu so we can make any needed corrections.

STATE	CONTACT INFO	REQUIREMENTS/PROCEDURES
ALABAMA	<p>CAN Central Registry Office of Child Protective Services Department of Human Resources</p> <p>Phone: (334) 353-3477 Fax: (334) 242-0939</p>	<p>Form Required: Alabama Department of Human Resources Child Abuse/Neglect (CA/N) Central Registry Clearance</p> <p>Original copy required, must be mailed or hand-delivered to office.</p> <p>Complete instructions available Online: http://www.dhr.alabama.gov/services/Child_Protective_Services/CentralRegistryClearance.aspx</p>
ALASKA	<p>Department of Health & Social Services 323 East 4th Avenue Anchorage, AK 99051</p> <p>Phone: (907) 269-4026 Fax: (907) 269-4026</p>	<p>Form Required: Clearance Form</p> <p>Email completed form to: Hss.ocsanccpchecks@alaska.gov</p> <p>Complete Instructions Available Online: http://dhss.alaska.gov/ocs/Pages/childprotection/default.aspx</p>
ARIZONA	<p>Arizona Department of Child Safety Office of Licensing & Regulation Background Investigation Unit P.O. Box 6030, Site Code C010-20 Phoenix, AZ 85005-6030</p> <p>Phone: 602-364-4319 Fax: (602) 265-3993</p>	<p>Form Required: DCS-1183A: Request for Search of Central Registry for Background Check, available for download here: https://dcs.az.gov/sites/default/files/DCS-1183A.doc</p> <p>May be submitted via mail, fax or emailed to DCSCentralRegistry@azdcs.gov</p> <p>More information available online: https://dcs.az.gov/</p>
ARKANSAS	<p>Arkansas Child Maltreatment Central Registry P.O. Box 1437, Slot S 566 Little Rock, AR 72203</p> <p>Phone: (501) 682-0405 Fax: (501) 682-0407</p>	<p>Form Required: Application for Child Maltreatment Central Registry, available for download here (at bottom of page): http://arkedu.state.ar.us/commemos/static/fy0809/4299.html</p> <p>http://humanservices.arkansas.gov/dcfs/DCFSformsLibrary/CFS-316.pdf</p>

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) 227-5052 Fax: (916) 227-6364 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: http://oag.ca.gov/childabuse/outofstatefosteradoption http://cclcd.ca.gov/adamwalshi_2609.htm
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/hsgwrNUiscdkir3QQ2yL3JJjbm4tqkyQFaNej0HBVI Original Signature Required, form can only be submitted by mail. \$28 Processing Fee, made payable to CDHS, BIU, Records and Reports More Information available online: http://coloradoofficeofearlychildhood.force.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en
CONNECTICUT	Department of Children and Families Careline 505 Hudson Street Hartford, CT 06106	Form Required: DCF-3033 Foster Care and Adoption Background Search Release, available on this page: http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=329378

DELAWARE	<p>DSCYF, OCCL Criminal History Unit 1825 Faulkland Road Wilmington, DE 19805 Phone: 302-892-5800 Fax: 302-633-5191</p> <p>Form Required: Delaware Child Protection Registry Request Form</p> <p>More information available online: http://kids.delaware.gov/information/adamwalsh.shtml</p>
DISTRICT OF COLUMBIA	<p>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</p> <p>Form Required: http://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR%20Request_new_0.pdf (General CPR Check Application)</p> <p>Submit letter via Fax, Attn: Supervisor, DC Child Protection Register Unit</p> <p>Additional Information may be available online: http://cfsa.dc.gov/service/background-checks</p>
FLORIDA	<p>Florida Department of Children and Families Office of Child Welfare Building 6 Room 339 1317 Winewood Boulevard Tallahassee, FL 32399</p> <p>Fax: 850-487-6064 Email: Adamwalsh.requests@myflfamilies.com</p> <p>Form Required: http://www.dcf.state.fl.us/programs/abuse/docs/CentralAbuseHotlineRecordSearch.pdf</p> <p>Submit via Fax, Mail or email</p>

<p>GEORGIA</p>	<p>Georgia Dept of Human Services Attn: Child Protective Services Screening 2 Peachtree St. NW, 18 Floor Atlanta Georgia 30303</p> <p>For questions send e-mail to: georgiaadamwalshcheck@dhs.ga.gov</p>	<p>Georgia's Child Protective Services Information System (Child Abuse Registry)</p> <p>Please ensure that the required documents below are available before submitting the screening request.</p> <p>1) Request on Letterhead 2) Signed Screening Request Form</p> <p>Note: If the request is for a foster/adoptive parent, have the applicant to sign the form.</p> <p>Online screening request: https://gacar.dhs.ga.gov/Screening/Home/AgencyRequest (State or government agency of this state or any other states.) Downloadable submission form: https://gacar.dhs.ga.gov/General/Home/Download/1?option=view</p> <p>* Georgia will not allow a private foster care agency access to their Central Registry check.</p>
<p>GUAM</p>	<p>Bureau of Social Services Administration Department of Public Health & Social Services 194 Hernan Cortez Avenue Hagatna, Guam 69610</p> <p>Phone: 671-475-2653 Fax: 671-477-0500</p>	<p>Form Required: None. Print request for information on letterhead.</p> <p>Signed release required.</p>
<p>HAWAII</p>	<p>Department of Human Services Child Welfare Services Section 420 Waiakamilo Road, Suite 300A Honolulu, HI 96817</p> <p>Phone: 808-832-0609 Fax: 808-832-0628</p>	<p>Form Required: Consent to Release Information from the Child Protective Services System Central Registry</p> <p>Original form must be mailed.</p> <p>Additional Information available online: http://humanservices.hawaii.gov/ssd/backgroundcheck/</p>

IDAHO

Idaho Department of Health & Welfare

Criminal History Unit
PO Box 83720
Boise, ID 83707-9815

Phone: 208-332-7990

Fax: 208-332-7991

Email:
crimhist@dhw.idaho.gov

Contact: Fernando Castro,
Program
Supervisor

E-mail:
Fernando.castrof@dhw.idaho.gov

Alternate e-mail:
crimhist@dhw.idaho.gov

Website: <https://chu.dhw.idaho.gov>

Form: The form found on the website is the authorization from the subject of the search to complete the Idaho Child Protection Registry Check. Additional documentation should be included to clarify request specifics.

Go to: Instructions (<https://chu.dhw.idaho.gov>)

Is the Form Required? Yes.

Signed release required. Yes – signed and notarized

Methods of transmission: Mail, fax, e-mail with attachment scanned in PDF format. E-mail to: crimhist@dhw.idaho.gov

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.

ILLINOIS

Department of Family & Children Services
406 E. Monroe Street, Station 30
Springfield, IL 62701

Phone: 217-557-0758

Fax: 217-782-3991

Form Required: [CFS 689 Authorization for Background Check for Programs NOT Licensed by DCFS](#) (note: This form is also available in Spanish at <http://www.illinois.gov/dcfs/aboutus/notices/Pages/default.aspx>)

Request may be submitted via mail, fax or email. Please specify on subject line: Out-of-State Child Welfare

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.in.gov

Form Required:
<https://forms.in.gov/Download.aspx?id=6543>

Request may be submitted to any Indiana Department of Child Service, county local office or to the Central Office Background Check Unit for Statewide Search Results. (**note:** for searches prior to 1998, please see additional instructions [here](#))

Requests may be faxed, emailed or mailed.

Additional information may be available online:
<http://www.in.gov/dcs/2363.htm>

To submit to individual DCF local office, please visit <http://www.in.gov/dcs/> And search for the correct county under “contact us”.

<p>IOWA</p>	<p>Central Abuse Registry Iowa DHS P.O. Box 4826 Des Moines, IA 50305 Fax: 515-564-4112 Email: DHSAbuseRegistry@dhs.state.ia.us</p>	<p>Form Required: Request for Child Abuse Information</p> <p>Forms may be submitted via Mail, Fax or Email.</p>
<p>KANSAS</p>	<p>Attn: DCF/Child Abuse and Neglect Central Registry P.O. Box 2637 Topeka, KS 66612</p> <p>Fax: 866-317-4279</p>	<p>Form Required: Registry Release Form</p> <p>Required fee of \$10</p> <p>Requests should be submitted via mail or fax</p> <p>Additional Information available online: http://www.dcf.ks.gov/services/PPS/Pages/Adam-Walsh-Legislation.aspx</p>
<p>KENTUCKY</p>	<p>Department for Community Based Services Records Management Section 275 East Main Street, 3E-G Frankfort, KY 40621</p> <p>Phone: 502-564-3834 Fax: 502 564-9554</p>	<p>Form Required: None</p> <p>Requests should be printed on letterhead and submitted via mail or fax.</p> <p>Additional information may be available online: http://chfs.ky.gov/dCBS/adamwalshforms.htm</p>
<p>LOUISIANA</p>	<p>Louisiana department of Children and Dept. of Children & Family Services – CW Attn: CPS Intake P.O. Box 3318 Baton Rouge, LA 70821</p> <p>Phone: 225-342-6827 Fax: 225-342-3480</p>	<p>Form Required: None</p> <p>Print Request on Letterhead and include:</p> <ul style="list-style-type: none"> • Name, Aliases • Date of Birth • Social Security Number • Purpose of Request <p>Request must be signed by the agency staff authorized to request the SCR Clearance</p>

Email:
DCFS.ChildProtectiveServices@LA.Gov

If the request is for a Foster/Adoption Applicant, the packet must include a release of information signed by the applicant to request the SCR Clearance.

For licensed private agencies requesting an Adam Walsh Act Clearance, a copy of the current agency license to provide foster/adoption services must be on file with DCFS CPS Section or needs to be forwarded with the packet.

Submit Request "Attention: Child Protective Services Intake", via email (preferred) or fax

Additional Information may be available on line:
<http://www.dcfslouisiana.gov/>

<p>MAINE</p>	<p>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</p>	<p>Agencies Requesting Child Protective Records Research Questions should be directed to Child Protective Intake via by phone 207-626-8620, press 2 or fax 207-287-5065.</p>
<p>MARYLAND</p>	<p>Maryland Department of Human Resources In-Home Services Social Services Administration 311 W. Saratoga Street, Room 553 Baltimore, MD 21201</p>	<p>Form Required: Consent for Release of Information/Background Clearance Request 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/</p>
<p>MASSACHUSETTS</p>	<p>Massachusetts Dept. of Children & Families Attn: CORI Unit 600 Washington St. 6th Floor Boston, MA 02111 Phone: 617-748-2079 Toll Free: 800-792-5200 Fax: 617-748-2441</p>	<p>For State/Public Agencies: No form is required. Submit Request on Agency Letterhead, and include the following information:</p> <ul style="list-style-type: none"> • Person's Name • Date of Birth • Social Security Number • Your Contact Info, including: Position, Title, Phone Number and return fax number <p>Submit form via fax.</p> <p>For Private Agencies:</p>

		<p>Submit a signed and notarized release form from the individual to be check. This must include the following:</p> <ul style="list-style-type: none">• First Name• Last Name• Maiden/Alias Name(s) if applicable• Date of Birth• Social Security Number• Massachusetts Address <p>Please also include requestor's contact information and language indicating the agency to whom the results are to be sent.</p> <p>Additional information may be available online: http://www.mass.gov/eohhs/gov/departments/DCF/request-background-checks.html</p>
<p>MICHIGAN</p>	<p>Department of Health & Human Services Children's Protective Services Program. PO Box 30037 235 S. Grand Ave, Suite 510 Lansing, MI 48909</p> <p>Phone: 517-335-3704 Fax: 517-241-7047</p> <hr/> <p>For Out of State Adoption and Foster Home Screening</p> <p>Email or Fax Request to:</p> <p>Ryan Akers Child Welfare Licensing Michigan Department of Health and Human Services PO Box 30650 Lansing, MI 48909-8150 Phone: 517-284-9714 Fax: 517-284-9719 Email: AkersR@michigan.gov</p> <p>OR</p>	<p>Form Required: Central Registry Clearance Request DHS 1929 http://www.michigan.gov/documents/dhs/DHS-1929_408961_7.dot</p> <p>Additional Information may be available online: http://www.michigan.gov/mdhhs/0,5885,7-339-73971_7119_50648_48330-180331--,00.html</p> <hr/> <p>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</p> <ol style="list-style-type: none">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: <ul style="list-style-type: none">• Name(s) of individuals.• Any previous names.• Date of birth.• Social Security number.

Kelly Maltby
Phone: 517-284-9706
Email:
maltbyk2@michigan.gov

MINNESOTA

Minnesota Department of
Human Services
Background Studies unit
P.O. Box 64242
St. Paul, MN 55164-0242

Phone: 651-431-6620
Fax: 651-297-1490

Form Required: [CANR-Child Foster Care of Adoption Background Study](#)

Additional Information may be available online:
http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_054413

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](#)
http://www.mdhs.ms.gov/media/202471/can_ccr_app.pdf

Complete instructions available here:
http://www.mdhs.ms.gov/media/202522/can_ccr_app_instructions.pdf

Additional Information may be available online:
<http://www.mdhs.ms.gov/family-childrens-services/child-abuse-central-registry/#>

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.missouri.gov/MSHPWeb/Publications/Forms/documents/SHP-159J.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: 406-841-2487

Form Required:

<http://dphhs2.mt.gov/Portals/85/cfsd/documents/Background%20Checks/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.aspx#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
Fax: 402 742 2344 (Fax is
preferred)
Email:
DHHS.CFSCentralRegistry@nebraska.gov

Form Required:

[APS CPS CFS Form](#)

Form must be signed, notarized and mailed

Additional Information may be available online:

http://dhhs.ne.gov/children_family_services/Pages/nea_cr.aspx

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 (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/>

<p>NEW HAMPSHIRE</p>	<p>NHDCYF Central Registry 129 Pleasant Street Concord, NH 03301</p> <p>Phone: 603-271-8383 Fax: 603-271-4729</p>	<p>Form Required: http://www.dhhs.nh.gov/hr/documents/registry.pdf</p> <p>Must be signed and notarized</p> <p>Form must be mailed, and include a self-addressed stamped envelope.</p>
<p>NEW JERSEY</p>	<p>Department of Children & Families Office of Licensing/CARI Unit P.O. Box 717 Trenton, NJ 08625-0717</p> <p>Phone: : 877-667-9845</p>	<p>Form Required: Out-of-State CARI Check Application (linked at the bottom of this page: http://www.state.nj.us/dcf/reporting/record/)</p> <p>Include the following with the form:</p> <ul style="list-style-type: none">• A Copy of your agency license or certification• A pre-paid return envelope for each request <p>Form must be submitted via mail, though fax may be approved in emergency situations.</p>
<p>NEW MEXICO</p>	<p>CYFD Protective Services PO Drawer 5160 CRC Unit Room 225 Santa Fe, NM 87502-5160</p> <p>Phone: 505-827-8400 Email: cyfd.pscriminalreco@state.nm.us</p>	<p>Form Required: Abuse and Neglect Check for Prospective Foster/Adoptive Parents</p> <p>Form must be signed, notarized and mailed.</p>
<p>NEW YORK</p>	<p>Office of Children & Family Services New York State Central Register P.O. Box 4480 Albany, NY 12204</p> <p>Phone: 518-474-5297 Fax: 518-486-3424</p>	<p>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)</p> <p>Form must be signed and notarized;</p>

<p>NORTH CAROLINA</p>	<p>NC Division of Social Services 820 S. Boylan Ave. MSC 2408 Raleigh, NC 27699 Attn: RIL</p> <p>Fax: 919-715-6714 Phone: 919-527-6340</p>	<p>Form Required: http://info.dhhs.state.nc.us/olm/forms/dss/dss-5268-ia.pdf</p> <p>Must be signed and submitted via fax or Mail; If mailed, a self-addressed stamped envelope must be included.</p>
<p>NORTH DAKOTA</p>	<p>Department of Human Services Children & Family Services 600 E. Boulevard Avenue, Dept 325 Bismarck, ND 58505</p> <p>Phone: 701-328-1846 Fax: 701-328-3538</p>	<p>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</p> <p>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.</p>
<p>OHIO</p>	<p>Central Registry on Child Abuse and Neglect Ohio Dept. of Job& Family Services Office of Families & Children PO Box 183204 Columbus, OH 43218-2709</p> <p>Phone: 614-752-1298 Fax: 614-728-6726</p>	<p>No form Required. Print Request on letterhead, and include the following:</p> <ul style="list-style-type: none">• Statement that search is required for Adam Walsh Child Protection and Safety Act of 2006 and that the subjects of the search previously resided in Ohio• Reason for the search (Investigation in progress, prospective foster parent applicant, etc.)• Full Name(s), Date(s) of Birth, and Social Security Number(s) of individuals requiring searches (including aliases/previous names)• Previous Address in Ohio, if available <p>Request may be faxed or mailed.</p>
<p>OKLAHOMA</p>	<p>Email: caniscps@okdhs.org Fax: 405-521-4373</p>	<p>No form required. Print request on letterhead and include the following:</p> <ul style="list-style-type: none">• Purpose of the request• Names/identifying information of family members for which history is being requested• Return email address and fax number

Request may be submitted via email (preferred) or Fax

<p>OREGON</p>	<p>Oregon Department of Human Services Background Check Unit P.O. Box 14870 Salem, OR 97309</p> <p>Phone: 503-378-5470</p> <p>Fax: 503-378-6314 Attn: Adam Walsh Coordinator Email: Adam-Walsh.Oregon@dhsoha.state.or.us</p>	<p>Form required:</p> <ul style="list-style-type: none">• Please e-mail Adam-Walsh.Oregon@dhsoha.state.or.us to request a copy of the form.• Form must be type-written and signed.• E-mail completed forms to Adam-Walsh.Oregon@dhsoha.state.or.us
<p>PENNSYLVANIA</p>	<p>ChildLine & Abuse Registry Department of Public Welfare PO Box 8170 Harrisburg, PA 17105</p> <p>Phone: (717) 783-6211 Toll-Free: 1-877-371-5422</p>	<p>Form Required: http://www.dhs.pa.gov/cs/groups/webcontent/documents/form/s_001762.pdf</p> <p>Fee: \$8, may be submitted as check or money order payable to Department of Public Welfare</p> <p>Submit form and fee together by mail.</p> <p>Additional Information may be available online: http://www.dhs.pa.gov/publications/findaform/childabusehistoryclearanceforms/index.htm#.Vk3l7HarRhE</p>
<p>PUERTO RICO</p>	<p>Directora Centro Estatal PO Box 194090 San Juan, PR 00919</p> <p>Phone: 787-625-4900 <i>*This number is currently out of order. We are trying to identify additional contact information for Puerto Rico.</i></p>	<p>Register of Convicted Persons for Sexual Offenses and Child Abuse http://sor.cjis.pr.gov/</p>

RHODE ISLAND	Rhode Island State Central Registry & Child Abuse Hotline DCYF 101 Friendship St. 2 nd Floor Providence, RI 02903 Phone: 800-742-4453 401-528-3842	
SOUTH CAROLINA	South Carolina Department of Social Services Attn: Cashier 1535 Confederate Avenue PO Box 1520 Columbia, SC 29202 Phone: 803-898-7229	Form Required: DSS Form 3072 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.
TENNESSEE	Email: EI_DCS_CPS_CentralRegistryCheck@tn.gov	Form Required: Tennessee DCS Database Search Results (Available on this page: http://www.tn.gov/dcs/article/child-protective-services-history-check) Include the following: <ul style="list-style-type: none">• Cover Letter on agency letterhead stating the reason for the request• 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)

		<p>The requested information must be sent via email; the form must be submitted in word format (.doc, .docx)</p> <p>Please include "Out of State Request" in the subject line, along with the name of the requesting state.</p> <p>Additional Information may be available online: http://www.tn.gov/dcs/article/child-protective-services-history-check</p>
TEXAS	<p>CBCU TX Abuse Neglect BGC, M/C 121-7 PO Box 149030 Austin, TX 78714</p> <p>Phone: 1-800-645-7549 Fax: 512-339-5829</p> <p>Email: TxABuseNeglectBGC@dfps.state.tx.us</p>	<p>Form Required: Request for Child Abuse/Neglect Central Registry – Centralized Background Check Unit (form 2970). http://www.dfps.state.tx.us/Application/Forms/showFile.aspx?NAME=F-500-2970.pdf</p> <p>Form must be notarized and submitted via email, fax or mail.</p>
UTAH	<p>Department of Human Services Division of Child & Family Services Attn: Child Abuse Background Screening 195 North 1950 West Salt Lake City, UT 84116</p> <p>Phone: 801-538-4466 Fax: 801-538-3993</p>	<p>Form Required: http://dcfs.utah.gov/pdf/forms/InformedConsent.pdf</p> <p>Please also include a copy of one of the following photo identifications:</p> <ul style="list-style-type: none">• Valid Driver's License• State Identification Card• Passport ID <p>Form should be mailed.</p> <p>Additional Information may be available online: http://dcfs.utah.gov/</p>
VERMONT	<p>Child Protection Registry Self-Inquiry Department of Children and Families, Osgood 3 103 South Main Street Waterbury, VT 05671</p> <p>Phone: 802-871-6474 Fax: 802-241-3301</p>	<p>Form Required: http://dcf.vermont.gov/sites/DCF/files/pdf/Registry_Self_Check.pdf</p> <p>Mail completed form and self-addressed stamped envelope</p> <p>Additional Information may be available online http://dcf.vermont.gov/protection/registry/self-check</p>

VIRGINIA	Virginia Department of Social Services Office of Background Investigations – Search Unit 801 East Main Street, 6 th Floor Richmond, VA 23219	Form Required: http://www.dss.virginia.gov/files/division/licensing/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	DSHS Children’s Administration ATTN: FISCAL PO Box 45710 Olympia, WA 98504 Email: CANhistorychecks@dshs.wa.gov Phone: 1-800-562-5624 Fax: 206-341-7930	Form Required: Washington State Child Abuse and Neglect Founded Findings Request from Another State (form DSHS #23-041) https://www.dshs.wa.gov/ca/child-safety-and-protection/child-abuse-and-neglect-can-founded-findings-requests-external-requestors Fee: \$20, check payable to DSHS Children’s ADMN *Form must be typewritten and signed. Any handwritten or incomplete forms will be returned. *Completed forms must be submitted by mail. <u>Requests from State Child Protective Service Investigators or Child Welfare Workers:</u> This type of request is for requestors from a <u>public child welfare agency</u> conducting an investigation for their state and must be sent on that state’s official letterhead stationery . The letter should include the request is being used for an investigation of child abuse or neglect and full names, dates of birth and SSN’s (if available) for parents and children. Send by email: CANhistorychecks@dshs.wa.gov or Fax: 206-341-7930/206-464-7464
WEST VIRGINIA	Bureau of Children and Families 350 Capitol Street, RM 691 Charleston, WV 25301 Phone: 304-558-7980	Form Required: Authorization and Release for Protective Services and Provider Record Checks for Adoption/Foster Care Only Child Care Agencies use this form: https://dhhr.wv.gov/bcf/Providers/Documents/AUTHORIZATIONRELEASERECORDCHECK.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:
CWBckgrdRequests@wisconsin.gov

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:

<https://dcf.wisconsin.gov/forms>

Or click here for the direct link to the English version:

<https://dcf.wisconsin.gov/files/forms/doc/5065.docx>

Form can be emailed or faxed. Hand-written signatures are required.

WYOMING

Department of Family Services
2300 Capitol Avenue
Third Floor
Hathaway building
Cheyenne, WY 82002
Phone: 307-777-5894
Fax: 307-777-3659

Form Required:
<https://docs.google.com/a/wyo.gov/viewer?a=v&pid=sites&srcid=d3lvLmdvdnXkZnN3ZWJ8Z3g6MTY4ODBhZmRkMzc2NzczOA>

(Central Registry Screening Form/DFS Form SS/APS-26)

Fee: \$10 for each individual screened; check or money order
Include Self-Addressed envelope (postage appreciated, but not required), typed list of names, 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>