



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.

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, C A/N Registry 50 Ripley Street Montgomery, AL 36130 Phone: (334) 242-9500 Fax: (334) 242-0939	<p>Form Required (1598): https://dhr.alabama.gov/wp-content/uploads/2019/07/form1598.pdf</p> <p>Instructions to complete form 1598 : https://dhr.alabama.gov/wp-content/uploads/2019/07/InstructionsforCentralRegistryForm.pdf</p> <p>Original copy required, must be mailed via US Mail, UPS or Fed Ex.</p>
ALASKA	Department of Health & Social Services 323 East 4 th Avenue Anchorage, AK 99501 Phone: (907) 269-4026 Fax: (907) 269-4098	<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>
AMERICA SAMOA		<p>Their registry is local and not available online. You must e-mail the agency to request the form</p> <p>Emails for the CPS unit to request the check are:</p> <p>CPS Branch Manager, Tufa Avegalio CFSD: Tufanua Avegalio : tavegalio@dhss.as</p> <p>Or CPS Program Coordinator Omeka "Max" Gaisoa: jezeniah@yahoo.com</p>
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=AYfSEg0h>

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)255-2801 or 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=32jjldV8>

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=iUts8VVQ>

To be used for employment purposes.

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/dcs-1083a>

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:

<https://dcs.az.gov/>

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/fy0809/4299.html>

<https://humanservices.arkansas.gov/images/uploads/ddds/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: [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>

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

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_b0iNZb13SBaa54VI7iN3UOzT3fWa/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

Directions for Adam Walsh requests:

- Request must be on the agencies' letterhead
- Must contain the individuals' demographic information (e.g. date of birth, names of children, etc...)
- Completed letters should be faxed to: 860-560-7071, or e-mailed: DCF.BackgroundCheck@ct.gov

Additional background screening info can be located here:

<https://portal.ct.gov/DCF/Background-Checks/Home#Walsh>

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_Check_Application_FINAL_030818_English_fillable_0.pdf (General CPR Check Application)

Submit letter via Fax, Attn: Supervisor, DC Child Protection Register Unit. Additional information may be available online:

<http://cfsa.dc.gov/service/background-checks>
<https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR%20Check%20FAQ%2010-06-17.pdf>

Updated 10/12/2020

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](mailto:adamwalsh.requests@myflfamilies.com)

Form Required:

[https://www.myflfamilies.com/service-
programs/abuse-
hotline/docs/Adam%20Walsh%20Request%20Form.
pdf](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%20Records%20Requ
est%20for%20Employment.pdf](https://www.myflfamilies.com/service-programs/background-screening/docs/Child%20Welfare%20Records%20Request%20for%20Employment.pdf)

*Submit via Fax or email

Additional information may be available here:

[https://www.myflfamilies.com/service-
programs/background-screening/](https://www.myflfamilies.com/service-programs/background-screening/)

Background Screening Help Desk:

888-352-2849

TTY: 711

<p><i>GEORGIA</i></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) General Info: https://gacar.dhs.ga.gov/General</p> <p>Screening Request for Any federal, federally recognized tribal, state, or local government entity:https://gacar.dhs.ga.gov/Screening/Home/ScreeningRequest/28</p> <p>Screening Request for Any entity licensed by any other state to place children for adoption: https://gacar.dhs.ga.gov/Screening/Home/ScreeningRequest/30</p> <p>For State/Government agencies seeking CPS Case history for Investigation/Adoption/Foster Care ONLY, please submit your request to georgiaadamwalshcheck@dhs.ga.gov</p> <p>To an investigator appointed by superior court to investigate a pending petition for adoption, please submit your request to georgiaadamwalshcheck@dhs.ga.gov</p>
<p><i>GUAM</i></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 or 671-475-2672 Fax: 671-477-0500</p>	<p>Form Required: None. Print request for information on letterhead.</p> <p>Signed release required.</p> <p>Contact: Linda.rodriquez@dphss.guam.gov</p>
<p><i>HAWAII</i></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

Attn: CWIS

P.O. Box 83720

Boise, ID 83720

Phone: (208) 332-7990

Fax: (208) 332-7991

crimhist@dhw.idaho.gov

Contact: Fernando Castro,
Program
Supervisor

Email:

castrof@dhw.idaho.gov

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

Form: The form is the authorization from the subject of the search to complete the Idaho Child Protection Registry Check.

Form:

https://chu.dhw.idaho.gov/documents/Idaho_CP_Registry_Check_Request_Form.pdf

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.

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: Form CFS 689

[https://www2.illinois.gov/dcf/aboutus/notices/Documents/cfs_689_authorization_for_background_check_for_programs_not_licensed_by_dcf_\(fillable\).pdf#search=689](https://www2.illinois.gov/dcf/aboutus/notices/Documents/cfs_689_authorization_for_background_check_for_programs_not_licensed_by_dcf_(fillable).pdf#search=689)

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.

	<ul style="list-style-type: none">• If there is a POSITIVE HIT, you will receive an email notifying you that your results will be returned via standard mail or fax.• <u>Return Agency information is required.</u> 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.
<p><i>INDIANA</i></p>	<p>Indiana Dept. Of Child Services, COBCU 302 W. Washington St. Room E306, MS08 Indianapolis, IN 46204</p> <p>Fax: 317-234-4633 Email: background.checkunit@dcs.in.gov</p> <p>Requests for CPI/CPS history checks must be submitted via Indiana's on-line portal.</p> <p>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</p> <p>Additional information may be available online: http://www.in.gov/dcs/2363.htm</p>

<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: https://dhs.iowa.gov/sites/default/files/470-3301.pdf?070520191428</p> <p>Complete a separate form for each person for whom info is requested</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: 785-296-8609</p>	<p>Form Required: http://www.dcf.ks.gov/services/PPS/Documents/OBI_1011_CAN_ROI.pdf</p> <p>Required fee of \$10</p> <p>Requests should be submitted via Mail/Email/or Fax” Email Address: DCF.CentralRegistry@ks.gov</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>Beginning Aug. 1, 2020, all CAN Registry checks must be submitted through the Kentucky On-Line Gateway online system</p> <p>Kentucky On-Line Gateway: https://kog.chfs.ky.gov/home/</p> <p>CAN Check Request User Guide</p> <p>Additional information may be available online: https://chfs.ky.gov/agencies/dcbs/dcc/Pages/nationalbackgroundcheck.aspx</p>

Updated 10/12/2020

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](mailto: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

<https://dcfscans.dcfsla.gov/>.

***Please visit the following website for additional information:

<http://www.dcfsla.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: http://dhr.maryland.gov/documents/Child%20Protective%20Services/1279A%20Background%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/</p>
<p>MASSACHUSETTS</p>	<p>Massachusetts Dept. of Children & Families Attn: Background Record Check Unit 2 Boylston St., 5th Floor Boston, MA 02116 Phone: 857-338-2966 Fax: 617-748-2441</p>	<p>Required Form: https://www.mass.gov/files/documents/2020/02/24/Adam%20Walsh%20Form%20%28rev%2002.24.2020%29_0.pdf Additional information may be available online: http://www.mass.gov/eohhs/gov/departments/dcf/request-background-checks.html</p>

<p>MICHIGAN</p>	<p>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</p> <p>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</p>	<p>Additional Information may be available online: https://www.michigan.gov/mdhhs/0,5885,7-339-73971_7119_50648_48330-180331--,00.html#Section_1</p> <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.
<p>MINNESOTA</p>	<p>Minnesota Department of Human Services Background Studies Division P.O. Box 64172 St. Paul, MN 55164-0172</p> <p>Phone: 651-431-6620 Fax: 651-431-7670</p>	<p>Form Required: https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7125-ENG</p> <p>Additional Information may be available online: https://mn.gov/dhs/general-public/background-studies/</p>

<p>MISSISSIPPI</p>	<p>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</p>	<p>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/</p>
<p>MISSOURI</p>	<p>Missouri Children's Division Background Screen/Investigations Unit P.O. Box 88 Jefferson City, MO 65103 Phone: 573-751-2330 Fax: 573-751-2607</p>	<p>Form Required: http://www.mshp.dps.mo.gov/MSHPWeb/PatrolDivisions/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/</p>
<p>MONTANA</p>	<p>Records Request DPHHS/CFSD PO Box 8005 Helena, MT 59604-8005 DPHHS/CFSD ATTN: Records Request Fax: 406-841-2046</p>	<p>Form Required: https://dphhs.mt.gov/Portals/85/cfsd/documents/BackgroundChecks/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</p>

<p>NEBRASKA</p>	<p>Nebraska Department of Health & Human Services Children & Family Services, Policy Unit Attention Central Registry P.O. Box 95026 Lincoln, NE 68509</p> <p>Phone: 402 471 9272 Email: DHHS.CFSCentralRegistry@nebraska.gov</p>	<p>Requests are accepted via mail with the form below OR requests are accepted via our online portal found here: https://ecmp.nebraska.gov/DHHS-CR/</p> <p>Form Required: APS CPS CFS Form</p> <p>Form must be signed, notarized and mailed</p> <p>Additional Information may be available online: http://dhhs.ne.gov/Pages/Abuse-and-Neglect-Central-Registry.aspx</p> <p>Please note:</p> <ul style="list-style-type: none">• 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.
<p>NEVADA</p>	<p>Nevada Division of child and Family Services Attn: Child Abuse and Neglect Records Check 4126 Technology Way, 1st Floor Carson City, NV 89706</p>	<p>Form Required: Request for Child Abuse & Neglect Screening http://dcfs.nv.gov/uploadedFiles/dcfsvgov/content/Policies/CW/1607B_Request_for_Child_Abuse_and_Neglect_Screening_ADA(2).pdf</p> <p>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.</p> <p>Email the completed form to DCFS-CANS@dcfs.nv.gov</p> <p>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.</p> <p>Additional Information may be available online: http://dcfs.nv.gov/Forms/CentralRegistry/</p>

<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: https://www.tn.gov/content/dam/tn/human-services/documents/NH_Form_2202.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>State Central Registry: 877 NJ ABUSE (877) 652-2873</p>	<p>Submit requests through: www.njportal.com/DCF/CARI</p> <p>Click on the Out of State “File an Out of State CARI” button. You will need the following information to complete the application:</p> <p>Requesting agency contact information - name, phone number, email address, and physical address.</p> <p>Please cite the statute that requires you to obtain the child abuse/neglect background check(s) and identify the reason for the background check(s) (i.e. employment, domestic/international adoption for resource (foster) care.)</p> <p>The information that the CARI Unit requires on the individual includes all aliases (married, maiden names, nicknames), race, date of birth, and <u>all</u> addresses where the person(s) resided while living in the State of New Jersey. Please include timeframe (days/months/years) when the individual lived in New Jersey. If the exact address is not known by the individual, the city or county that he/she lived in during the timeframe will suffice. Social security number is optional.</p> <p>If purpose is adoption or foster placement and you are not a governmental agency, <i>include a copy of the State agency license or certification for your agency or facility.</i> This can be uploaded during the last step.</p> <p>If other than an Adam Walsh, Hague Convention or UAA of 2012 request, or the Child Care and Development Block Grant Act include a copy of the legal authority (e.g. law, statute, administrative rule) which compels the disclosure of CARI information. This can be uploaded during the last step.</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: https://cyfd.org/docs/NM_Child_Abuse_and_Neglect_Check_Form.pdf</p> <p>Form must be signed, notarized and mailed.</p>

Updated 10/12/2020

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.a
sp](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
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:

<https://files.nc.gov/ncdhhs/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	<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>
OHIO	<p>Ohio SACWIS Registry Ohio Dept. of Job & Family Services Office of Families & Children PO Box 183204 Columbus, OH 43218-3204</p> <p>Phone: 614-752-1298 Fax: 614-728-6726</p>	<p>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.</p> <p>Link to create an ID and submit request: https://ap.jfs.ohio.gov</p> <p>OSAPS Log-in: https://ap.jfs.ohio.gov/Login.aspx</p> <p>OSAPS Q&A: http://jfs.ohio.gov/ocf/SACWIS-AllegedPerpetratorSearch.stm</p>
OKLAHOMA	<p>Email: caniscps@okdhs.org Fax: 405-521-4373</p>	<p>****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.</p>

<https://ccrrpublicil.okdhs.org/ccrrpublicil/public/>

<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 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">• 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.RecordsRequest@dhsoha.state.or.us
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<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 Fax: 717-783-6354</p>	<p>State Child Welfare Agencies & Law Enforcement</p> <p>Fax a request on official State or law enforcement agency letterhead to the attention of: ChildLine</p> <p>The request should include:</p> <ul style="list-style-type: none">• Requestors Name, Title, Contact Number & a Return Mailing Address• Full name of the person(s) to be searched• Social Security Number• Date of Birth <p>If you are not a State Child Welfare Agency or Law Enforcement, a \$13 fee is required. Make check or money order payable to Department of Public Welfare</p> <p>You can also create an account with the state's Online Child Welfare Portal to obtain child abuse history: https://www.compass.state.pa.us/cwis/public/home</p> <p>You can find additional information here: http://keepkidssafe.pa.gov/resources/clearances/index.htm</p>
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<i>PUERTO RICO</i>	Directora Centro Estatal PO Box 194090 San Juan, PR 00919 Phone: 787-625-4900 E-mail contacts: Lisa M. Agosto Carrasquillo Imagosto@familia.pr.gov or Damaris Medina Ramos dmedina@familia.pr.gov	Register of Convicted Persons for Sexual Offenses and Child Abuse http://sor.cjis.pr.gov/ Form Required: Puerto Rico Request Form
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- 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"
 - o 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

<i>SOUTH CAROLINA</i>	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
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SOUTH DAKOTA Department of Social Services/CPS
700 Governors Drive
Pierre, SD 57501

Phone: 605-773-3227
Fax: 605-773-6834

Form Required: Contact by phone for instructions. Signed, Witnessed and Notarized release required.
Form: [2019-SouthDakotaOOS-ScreeningForm-agency.docx](#)

Submit requests: DSS Central Registry
Screenings Email: DSSCRS@state.sd.us

Central Registry of Child Abuse & Neglect
Information Brochure
<https://dss.sd.gov/formsandpubs/docs/ABUSE/CentralRegistry.pdf>

TENNESSEE 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>

Submit for EACH applicant for whom you are requesting a search:

1. A cover letter (notice) on your agency's letterhead stating the reason you are requesting a central registry search.
2. Attached "Tennessee DCS Database Search Results" form completed **in Word** format.
3. **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).**
4. 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:
<https://www.tn.gov/dcs/contact-us/records-management-division/cps-history.html>

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.state.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:
<http://www.dfps.state.tx.us/Application/Forms/showFile.aspx?NAME=F-500-2970.pdf>

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: <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/>

VERMONT

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

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

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	Department of Children, Youth, and Families ATTN: FISCAL PO Box 40970 Olympia, WA 98504-0970 CANhistorychecks@dcyf.wa.gov Email: CANhistorychecks@dcyf.wa.gov Phone: 1-800-998-3898 Fax: 206-341-7930	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 per person, check or money order payable to Department of Children, Youth, and Families (DCYF) *Form must signed and not be hand written. Any unsigned, handwritten, or incomplete forms will be returned. *Completed forms must be submitted by mail to: Department of Children, Youth, and Families ATTN: FISCAL, PO Box 40970, Olympia, WA 98504-0970 Requests from State Child Protective Service Investigators or Child Welfare Workers: For a Public Child Welfare agency requesting Child Abuse/Neglect (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 and must include parent and child information. For specific instructions, click: https://www.dcyf.wa.gov/safety/foundedfindings-externalrequestors Public Disclosure Requests: Specific <u>records</u> requests must be made through DCYF Public Disclosure at 1-844-506-8375 or dcyf.publicdisclosure@dcyf.wa.gov upon completion of the CA/N search.

<i>WEST VIRGINIA</i>	<p>Bureau of Children and Families 350 Capitol Street, RM 691 Charleston, WV 25301</p> <p>Phone: 304-558-7980</p>	<p>Form Required: https://dhhr.wv.gov/bcf/Providers/Documents/AUTHORIZATIONRELEASERECORDCHECKFOSTERADOPTONLY.pdf</p> <p>Child Care Agencies use this form: https://dhhr.wv.gov/bcf/Providers/Documents/AUTHORIZATIONRELEASERECORDCHECK.pdf</p> <p>Form should be filled out using blue ink; original should be submitted via mail to address listed on form.</p>
<i>WISCONSIN</i>	<p>Department of Safety and Permanence 201 E. Washington Street Madison, WI 53703</p> <p>Email: CWBckgrdRequests@wisconsin.gov</p> <p>Fax: (608) 226-5521</p>	<p>Form Required: DCF-F-5065-E Request for Child Protective Services Background Check for Certain Purposes.</p> <p>Search for Form #5065 on this page to access form in English, Hmong, or Spanish: https://dcf.wisconsin.gov/forms</p> <p>Or click here for the direct link to the English version: https://dcf.wisconsin.gov/files/forms/doc/5065.docx</p> <p>Form can be emailed or faxed. Hand-written signatures are required.</p>
<i>WYOMING</i>	<p>Department of Family Services Central Registry 2300 Capitol Ave, 3rd Floor Cheyenne, WY 82002</p>	<p>Additional information and forms available on their website: https://dfs.wyo.gov/about/central-registry/</p>

Updated 10/12/2020

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>