*We strive to keep this list accurate and up to date. If you notice any discrepancies, please contact us at*

[*hqw.fs.adamwalsh.requests@myflfamilies.com*](mailto:hqw.fs.adamwalsh.requests@myflfamilies.com) *so we can make any needed corrections.*

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

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

|  |  |  |
| --- | --- | --- |
| *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  Additional info can be found here: <https://dhr.alabama.gov/child-protective-services/central-registry-clearance/> | Alabama Dept. of Human Resources Child Abuse/Neglect Central Registry Clearance Form (1598): <https://dhr.alabama.gov/wp-content/uploads/2019/07/form1598.pdf>  Instructions to complete form 1598 : <https://dhr.alabama.gov/wp-content/uploads/2019/07/InstructionsforCentralRegistryForm.pdf>  Original copy required, must be mailed via US Mail, UPS, or Fed Ex. |
| *ALASKA* | Department of Health & Social Services  323 East 4th Avenue Anchorage, AK 99501  Phone: (907) 269-4026  Fax: (907) 269-4098 | Form Required: [Clearance Form](http://dhss.alaska.gov/ocs/Documents/FosterCare/pdf/06-9437.pdf)  Email completed form to: [Hss.ocsanccpchecks@alaska.gov](mailto:Hss.ocsanccpchecks@alaska.gov)  Complete Instructions Available Online: [http://dhss.alaska.gov/ocs/Pages/childprotection/d](http://dhss.alaska.gov/ocs/Pages/childprotection/default.aspx) [efault.aspx](http://dhss.alaska.gov/ocs/Pages/childprotection/default.aspx) |
| *AMERICAN SAMOA* | CPS Branch Manager,  Tufa Avegalio CFSD: [tavegalio@dhss.as](mailto:tavegalio@dhss.as)  CPS Program Coordinator  Omeka "Max" Gaisoa: [ogaisoa@dhss.as](mailto:ogaisoa@dhss.as%20) | Their registry is local and not available online. You must e-mail the agency to request the form  Emails the CPS unit to request the check. |
| *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](mailto:DCSCentralRegistry@azdcs.gov) (preferred method).  For questions, contact Abe Vicente 602-513-2032  ([avicente@azdcs.gov](mailto:avicente@azdcs.gov)) or ([Abraham.Vicente@azdcs.gov](mailto:Abraham.Vicente@azdcs.gov)).  Additional info can be found online here: <https://dcs.az.gov/> | Form Required: If you live in Arizona and are required to conduct this check for another state, please contact [FHLAWA@azdcs.gov](mailto:FHLAWA@azdcs.gov) or call 602-255- 2801.  Form CSO-1131A  [https://dcs.az.gov/content/cso-1131a](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdcs.az.gov%2Fcontent%2Fcso-1131a&data=04%7C01%7Ccentersupport%40usf.edu%7Ce288d60834084f9bccc808d99da5f754%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C637714158424023274%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=3hhODC9m7jbewb4vYvjiklgx615072M7eM6mofXDwso%3D&reserved=0)  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/file/13311/download?token=iUts8VVQ>  ALL Adam Walsh requests require an email address. Incomplete or unsigned requests cannot be processed and will be returned.  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 rejected. |
| *ARKANSAS* | Arkansas Child Maltreatment Central Registry  P.O. Box 1437, Slot S 566 Little Rock, AR 72203  Phone: (501) 682-0405  Email: [**ARAbuseNeglectRecords@dhs.arkansas.gov**](mailto:ARAbuseNeglectRecords@dhs.arkansas.gov) | Submitting an Arkansas Child Maltreatment Central Registry Background Check Request Directions: <https://humanservices.arkansas.gov/divisions-shared-services/children-family-services/request-a-child-maltreatment-check/>  Child Maltreatment Registry Request Link: <https://ardhs.formstack.com/forms/dcfs_central_registry_request_v2> |
| *CALIFORNIA* | California Dept. of Justice Department of Justice    Bureau of Criminal Information & Analysis Child Abuse Central Index  Attention: CACI Response Unit  P.O. Box 903387  Sacramento, CA 94203-3870  Phone: (916) 210-4092  Fax: (916) 227-6364  [BGC.Verification@ct.gov](mailto:BGC.Verification@ct.gov)  Training Video  <https://tinyurl.com/y6sry8ej>  Link to Portal <https://portal.dcf.ct.gov/Portal/Main/#dashboard>  **Link for Information Regarding the process for out of state foster/adoption processes**  <https://www.oag.ca.gov/childabuse/outofstatefosteradoption> | Form Required: [BCIA 4057 Child Abuse Central](https://oag.ca.gov/sites/all/files/agweb/pdfs/childabuse/bcia4057.pdf) [Index Inquiry Request for Out of State Foster Care &](https://oag.ca.gov/sites/all/files/agweb/pdfs/childabuse/bcia4057.pdf) [Adoption Agencies](http://ag.ca.gov/childabuse/pdf/bcia4057.pdf)  Due to the enactment of public act 22-42 (PA 21-42) effective 7/1/2022, agencies are no longer required send DCF copies of the completed DCF 3031/3033 forms that have been submitted via the CT-KIND portal.  Applicants are still required to submit signed authorization to the requesting agencies and the agencies should retain the signed forms for their records.  We are no longer accepting background check requests via email, mail, or fax.  Please see below for directions on how to access and submit your requests via our new portal-  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.  We have implemented a new portal that will allow for easier submission of checks and in many cases a faster return of results for your agency.  Our goal is to improve upon our current system and make a more streamlined process for both the applicants and the agency's requesting the checks. We will no longer be accepting background check requests via email, fax or mail by the end of summer.  We are asking any agencies that will require more than one individual to submit and access results, set up a shared email as you can only have one email address assigned to each token.  Once we receive the shared email or confirmation that there is only one person accessing the portal, we will provide you your token code.    $15 Processing fee |
| *COLORADO* | Background Investigation Unit Division of Early Care and Learning, CDHS 1575 Sherman Street, 1st Floor Denver, CO 80203 Phone: 1-800-799-5876 Fax: 303-866-5340    **Criminal Background Investigation Email:** [**cdec\_cbc\_biu@state.co.us**](mailto:cdec_cbc_biu@state.co.us)  **Background Inquiry Email:** [**cdec\_backgroundinvestigation@state.co.us**](mailto:cdec_backgroundinvestigation@state.co.us)  OEC Website: <https://cdec.colorado.gov/background-checks>  For more information on Background checks please visit the OEC website below:  OEC Website: <https://cdec.colorado.gov/background-checks> | The Colorado Office of Early Childhood is excited to announce a new online TRAILS submission tool to request Colorado Child Abuse and Neglect background checks.  Important changes to the process:   * Per a new statute of interpretation - Only the Applicant (person being checked) can receive their results. * The ability to submit payments online via credit card or e-check. * New TRAILS requests forms have been added to our website, we will only accept forms with a revised date of 2/16/2022 starting on March 16, 2022. * An approved form of identification is now required to be submitted with the Individual request.  Approved forms of identification are as follows: Driver’s License, Passport, State-Issued Identification Card, Military Identification Card, Social Security Card, Birth Certificate.   \*Please note you cannot access the online submission process on mobile devices.\*  To begin the online request application process, please download the [Public Individual Child Abuse and Neglect](https://coloradoshinesportal.force.com/providerhub/s/licensing-pre-biu) (Google Chrome browser is preferred). You may submit the following payments online: credit card and e-check with your request. Online requests will be processed within 10 days. If you choose to mail in a request and/or manually submit a paper check or money order, this process may take up to 30 days.  You may submit the following payments online: credit card and e-check with your request. Online requests will be processed within 10 days. If you choose to mail in a request and/or manually submit a paper check or money order, this process may take up to 30 days.  Please note: Results are not released to the person being checked. They are released to the agency/facility requesting the background check.  If you need to submit a mailed-in paper version request form:  Complete, print and sign a Child Abuse and Neglect Records Check form. Please note, only typed forms will be accepted. To access the fillable pdf please download and save forms to a laptop or desktop computer. Instructions and sample forms are available upon request.   * Results are not released to the person being checked. They are released to the agency/facility requesting the background check. * [Facility Child Abuse and Neglect (Trails) Request](https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/41000000Cfvu/sx9D3YTt.feD_pOpI.NCh73JhczLcQUqJBwXU1Vr92w) (Colorado Licensed facilities only) * Write check or money order payable to the “CDHS Background Investigation Unit (BIU)” for required Background Investigation with the required fee of $35 per form. We do not accept cash. * Mail completed form(s) and payment to:   Colorado Department of Human Services Division of Early Learning Licensing Administration 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](mailto:DCF.BackgroundCheck@ct.gov)  [BGC.Verification@ct.gov](mailto:BGC.Verification@ct.gov)  Phone: 1-800-842-2288 option #4  Fax: 860-560-7071 | If needed for Foster Care or Adoption use Form 3033: <https://portal.ct.gov/-/media/DCF/Policy/NEW-fillin-Forms/DCF-3033-O.pdf>  Additional background screening info can be located here: <https://portal.ct.gov/DCF/Background-Checks/Home> |
| *DELAWARE* | DSCYF, OCCL  Criminal History Unit  1825 Faulkland Road  Wilmington, DE 19805  Phone: 302-892-5800  Fax: 302-633-5191  Further information about the Child Protection Registry can be located at: <https://kids.delaware.gov/fs/fs_cpr.shtml> | Form Required:  All checks must be submitted through the Delaware Child Protection Registry Request Web Portal.  They no longer accept requests through email, fax, spreadsheet or postal mail.  [https://childprotectionregistry.delaware.gov](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fchildprotectionregistry.delaware.gov%2Fs%2Flogin%2F%3FstartURL%3D%252Fs%252F%26ec%3D302&data=02%7C01%7Ccentersupport%40usf.edu%7C1b0013ff515546a4032e08d7c10a62f9%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637190122971349513&sdata=MG3QDomXrfNz8CM%2B0m%2FQVi%2FJwvwEfpE3Sx%2BES4W46ww%3D&reserved=0)  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 |
| *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](mailto:cfsa@dc.gov)  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-welfare> | Form Required:  <https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR_Check_Application_July2020_childwelfare.pdf>  (Child Welfare purposes)  Submission Instructions & Application:  <https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/CPR_Submission_Instructions_04-22-20_English.pdf>  More information available online:  <https://cfsa.dc.gov/publication/cpr-request-application-child-welfare> |
| *FLORIDA* | Florida Department of  Children and Families  Office of Child Welfare  2415 N. Monroe St.  Suite 1176  Tallahassee, Florida  32303  Analyst Helpline: 855-776-2729  Fax: 850-487-6064  Email: [hqw.fs.adamwalsh.requests@myflfamilies.com](mailto:hqw.fs.adamwalsh.requests@myflfamilies.com) | Form Required:    \*Submit via Fax or email  Form used for Out of State Employment purposes:    Additional information may be available here: <https://www.myflfamilies.com/public-records> |
| *GEORGIA* | 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@dhs.ga.gov](mailto:georgiaadamwalshcheck@dhs.ga.gov)  **\*Note: EFFECTIVE 6/2/2022-** Due to discrepancies observed, if your agency is submitting a request for an active/open investigation and you have more than one person that will require a screening, you will need to ensure that you have the person(s) listed in the household section for each application(s) submitted. If you submit applications for a family, and the household members are not listed in the household section the request will not be completed.  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.) | Screening Request Form/Applications are available here: <https://dfcs.georgia.gov/services/child-abuse-neglect/georgia-adam-walsh>  Please review the instructions on the website prior to submitting a request.  Requests can take up to 30 days to be processed depending on the volume of incoming requests. 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](mailto: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 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 Administration  Department of Public Health & Social Services  194 Herman Cortez Avenue,  Hagatna, Guam 69610  Phone:  (671) 475-2653  Fax: 671-477-0500  E-mail: [krisinda.aguon@dphss.guam.gov](mailto:krisinda.aguon@dphss.guam.gov) | Form Required: Consent of disclosure forms to release Information from the Child Protective Services System Central Registry.  Print request for information on letterhead signed consent form to include Date of Birth (DOB) and (Any Alias if Any).  Send requests to Contact:  Krisinda C. Aguon  Human Services Program Administrator  194 Herman Cortez Avenue, Suite 309, Hagatna, Guam 96910 |
| *HAWAII* | Department of Human Services  Child Welfare Services Section  420 Waiakamilo Road, Suite 300A  Honolulu, HI 96817  Phone: 808-832-0609 5052  Fax: 808-832-0628 | Form Required: [Consent to Release Information](http://humanservices.hawaii.gov/ssd/files/2014/04/Protective-Service-Central-Registry-Consent-4-14.pdf) [from the Child Protective Services System Central](http://humanservices.hawaii.gov/ssd/files/2014/04/Protective-Service-Central-Registry-Consent-4-14.pdf) [Registry](http://humanservices.hawaii.gov/ssd/files/2014/04/Protective-Service-Central-Registry-Consent-4-14.pdf)  Original form must be mailed. Additional Information available online:  <http://humanservices.hawaii.gov/ssd/backgroundcheck/> |
| *IDAHO* | Idaho Department of Health & Welfare  Criminal History Unit  Attn: CWIS  P.O. Box 83720  Boise, ID 83720  Contact: Fernando Castro, Program  Supervisor  Phone:  (208) 332-7990  Fax:       (208) 332-7991  Email: [crimhist@dhw.idaho.gov](mailto:crimhist@dhw.idaho.gov)  Methods of Transmission: Mail, fax, e-mail with attachment scanned in PDF format.  Go to: <https://healthandwelfare.idaho.gov/chu> | Website:  <https://healthandwelfare.idaho.gov/chu>  Form: The form is the authorization from the subject of the search to complete the Idaho Child Protection Registry Check.  Form: Instructions are on the form-  <https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=18184&dbid=0&repo=PUBLIC-DOCUMENTS&cr=1>  Is the Form Required? Yes  Signed release required? Yes –  signed and notarized.  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  CFS689 forms will only be accepted electronically, via our dedicated email address: [DCFS.689Background@Illinois.gov](mailto:DCFS.689Background@Illinois.gov) | Form Required: Form CFS 689 <https://www2.illinois.gov/dcfs/aboutus/notices/Documents/cfs_689_authorization_for_background_check_for_programs_not_licensed_by_dcfs_(fillable).pdf#search=689>    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)  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.in.gov](mailto:background.checkunit@dcs.in.gov) | Requests for CPI/CPS history checks must be submitted via Indiana’s on-line 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.state.ia.us](mailto:DHSAbuseRegistry@dhs.state.ia.us) | Form Required:  <https://dhs.iowa.gov/sites/default/files/470-0643.pdf?010220231556>  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: 785-296-1729  Email:  [DCF.CentralRegistry@ks.gov](mailto:DCF.CentralRegistry@ks.gov) | Form Required: [http://www.dcf.ks.gov/services/PPS/Documents/OBI\_1011\_CAN\_ROI.pdf](https://nam04.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.dcf.ks.gov%2Fservices%2FPPS%2FDocuments%2FOBI_1011_CAN_ROI.pdf&data=02%7C01%7Ccentersupport%40usf.edu%7Ccd5708ef137a45f9578108d6b451675a%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C636894659050406303&sdata=Eho6OlNrojaQu%2BE9QHW2lfxKEj4shzGjSy94fGpn7zo%3D&reserved=0)  Required fee of $10  Requests should be submitted via  Mail/Email/or Fax  Additional Information available online: [http://www.dcf.ks.gov/services/PPS/Pages/Adam-](http://www.dcf.ks.gov/services/PPS/Pages/Adam-Walsh-Legislation.aspx) [Walsh-Legislation.aspx](http://www.dcf.ks.gov/services/PPS/Pages/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  Additional information may be available online:  <https://chfs.ky.gov/agencies/dcbs/Pages/walsh.aspx> | 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/Documents/dpp159backgroundcheckrelativefictivekin.pdf>  The state of Kentucky only accepts registry check requests through their online portal, located at <https://kog.chfs.ky.gov/home> using the CAN application. |
| *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](mailto:dcfs.childprotectiveservices.dcfs@la.gov) [cfs@la.gov](mailto:dcfs.childprotectiveservices.dcfs@la.gov)  The CANS system can be accessed through the following link [https://dcfscans.dcfs.la.gov/.](https://dcfscans.dcfs.la.gov/)  The website gives detailed instructions regarding how to begin and complete the process of requesting the clearances that you need. | The agency requesting the information will need to apply and request certification for their agency to obtain an account in our on-line (Child Abuse and Neglect System, CANS).  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) |
| *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  Questions should be directed to Child Protective Intake via by phone 207-626-8620, press 2 or fax 207-287-5065  The online portal for EMPLOYMENT checks (non-Adam Walsh requests) is:  [*maine.gov/online/cpsbackgroundcheck*](file:///C:\Users\dalton-michael\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\C8IDGFDZ\maine.gov\online\cpsbackgroundcheck) | Requests must be submitted by email to: [ADAMWALSH.DHHS@maine.gov](mailto: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 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’ or ‘This person has substantiated findings of Child Abuse and Neglect in the State of Maine’. |
| *MARYLAND* | Maryland Department of Human Resources  In-Home Services Social Services Administration  311 W. Saratoga Street, Room 553  Baltimore, MD 21201 | Form Required: <http://dhr.maryland.gov/documents/Child%20Protective%20Services/1279A%20Background%20Clearance%20Form.pdf>  Form must be signed and Notarized. [Click Here](http://dhr.maryland.gov/documents/Child%20Protective%20Services/1279B%20Background%20Clearance%20Form%20Instructions.pdf) for instructions for completing the form.  Additional information may be available online: [http://dhr.maryland.gov/child-protective-](http://dhr.maryland.gov/child-protective-services/child-protective-services-background-search-the-central-registry/) [services/child-protective-services-background-](http://dhr.maryland.gov/child-protective-services/child-protective-services-background-search-the-central-registry/) [search-the-central-registry/](http://dhr.maryland.gov/child-protective-services/child-protective-services-background-search-the-central-registry/) |
| *MASSACHUSETTS* | Massachusetts Dept. of Children & Families Attn: Background Record Check Unit  2 Boylston St., 5th Floor  Boston, MA 02116  Phone: 857-338-3030  Fax: 617-748-2441  [MA.CPS.CHECK@MassMail.State.MA.US](mailto:MA.CPS.CHECK@MassMail.State.MA.US) | Required Form: <https://www.mass.gov/files/documents/2020/02/24/Adam%20Walsh%20Form%20%28rev%2002.24.2020%29_0.pdf>  Please mail, fax or email (choose 1 option only.)  Mailing it in to:  600 Washington St.  Boston, MA 02111  Additional information may be available online: [http://www.mass.gov/eohhs/gov/departments/dcf/](http://www.mass.gov/eohhs/gov/departments/dcf/request-background-checks.html) [request-background-checks.html](http://www.mass.gov/eohhs/gov/departments/dcf/request-background-checks.html) |
| *MICHIGAN* | Division of Child Welfare Licensing  Michigan Department of Health and Human Services  235 S Grand Ave,  Suite 1305  PO Box 30650  Lansing, MI 48909  Fax: 517-284-9719  **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](mailto:MDHHS-DCWL-OSCR@michigan.gov)  Additional Information may be available online: https://www.michigan.gov/mdhhs/0,5885,7-339-73971\_7119-180331--,00.html#Section\_1 | Requests must come from the child placing agency working with the foster or adoptive applicant. The request must be in writing on the requester's letterhead stating the reason for the request (example: foster home licensing, adoptive placement, etc.) and must include  1) Name and title of individual requesting the information.  2) Contact information (phone, fax numbers, email address, etc.)  3) Name of the individuals you are requesting to be cleared.  4) The individual your agency is requesting to be cleared must complete the [Central Registry Clearance Request - DHS-1929 form](https://www.michigan.gov/documents/mdhhs/DHS-1929_Central_Registry_Clearance_Request_669315_7.dotx) 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: [https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7125-ENG](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fedocs.dhs.state.mn.us%2Flfserver%2FPublic%2FDHS-7125-ENG&data=02%7C01%7Ccentersupport%40usf.edu%7C6856159ba8f6473c569308d71042c3c5%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C636995751253562144&sdata=Iq9X4jYd5W9Gpp2j%2FVyxquVZqjh7EfCl4JJr1RIiDO0%3D&reserved=0)  Additional Information may be available online: [https://mn.gov/dhs/general-public/background-studies/](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fmn.gov%2Fdhs%2Fgeneral-public%2Fbackground-studies%2F&data=02%7C01%7Ccentersupport%40usf.edu%7C6856159ba8f6473c569308d71042c3c5%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C636995751253572141&sdata=vz0qLKJzc6xzt4zj1B%2F%2F4bS1ykuj07kvwlhlI%2BkEccg%3D&reserved=0) |
| *MISSISSIPPI* | Mississippi State Department of Public Safety  MDCPS, Central Registry, PO Box 346, Jackson, MS 39205  Phone: 601-359-4487 or 601-359-4538  Email: [mscentralregistry@mdcps.ms.gov](mailto:mscentralregistry@mdcps.ms.gov)  Fax: 601-576-2584  For additional questions contact Julie Henderson (601) 364-5059 or Nicole Banes (601) 364-1101 or email [CHRCUnit@msdh.ms.gov](mailto:CHRCUnit@msdh.ms.gov) | Effective October 15, 2021 complete instructions available here:  <https://msdh.ms.gov/msdhsite/_static/resources/18345.pdf>  New Child Abuse Registry Check Form:  <https://na2.docusign.net/member/PowerFormSigning.aspx?PowerFormId=648d8b01-c287-45f5-9d43-31f10f7a915f>  Additional Information may be available online:  <https://www.mdcps.ms.gov/obtain-child-abuse-neglect-central-registry-information/> |
| *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)  Fax: 573-522-6981  Email: [fcsr@health.mo.gov](mailto:fcsr@health.mo.gov)  \*\*The FCSR cannot be used for child abuse investigation inquiries. | * 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 children. * The individual must be registered 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>. |
| *MONTANA* | Records Request DPHHS/CFSD  PO Box 8005  Helena, MT 59604-8005  DPHHS/CFSD  ATTN: Records Request Fax: 406-841-2046  Email: [ChildFamilyServicesDiv@mt.gov](mailto:ChildFamilyServicesDiv@mt.gov) | Form Required:  [https://dphhs.mt.gov/cfsd/BackgroundChecks](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdphhs.mt.gov%2Fcfsd%2FBackgroundChecks&data=04%7C01%7Ccentersupport%40usf.edu%7Cf8184adddec3468f564b08d9dc28a147%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C637782889331730879%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=31shB5nlxLxzOFMXn6%2BCgN62ni4Ga%2BD2FneAa%2FzAMTU%3D&reserved=0)  Completed form should be signed and notarized and submitted by mail or fax. Incomplete or Illegible forms will be returned.  Questions should be emailed. |
| *NEBRASKA* | Nebraska Department of Health & Human Services Children & Family Services, Policy Unit  Attention Central Registry  P.O. Box 95026 Lincoln, NE 68509  Phone: 402 471 9272  Email:  [DHHS.CFSCentralRegistry@nebr](mailto:DHHS.CFSCentralRegistry@nebraska.gov) [aska.gov](mailto:DHHS.CFSCentralRegistry@nebraska.gov)  *Please note:*  Requests via fax or e-mail are no longer accepted. | 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/>  Form Required:  <http://10.22.144.89/inboundattachment/2022-11/CFS-5(fillable)extended%20Rev.%206-18719777688376.pdf>  Form must be signed, notarized, and mailed  Additional Information may be available online:  <http://dhhs.ne.gov/Pages/Abuse-and-Neglect-Central-Registry.aspx>  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  Phone: (775)684-7941  Email: [DCFS-CANS@dcfs.nv.gov](mailto:DCFS-CANS@dcfs.nv.gov%20)    For additional questions or if a response is **not received** within 15 business days of the request, please email or call. | Form Required: Request for Child Abuse & Neglect Screening  <http://dcfs.nv.gov/uploadedFiles/dcfsnvgov/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  Additional Information may be available online: <http://dcfs.nv.gov/Forms/CentralRegistry/> |
| *NEW HAMPSHIRE* | NHDCYF Central Registry 129 Pleasant Street  Concord, NH 03301  Phone: 603-271-4259  Fax: 603-271-4729  Additional information may be available here: <https://www.dhhs.nh.gov/programs-services/child-protection-juvenile-justice/central-registry> | Form Required:  <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents/2021-11/dcyf-form-2501.dotx>  Must be signed and notarized  Form must be mailed and include a self-addressed stamped envelope. |
| *NEW JERSEY* | Department of Children & Families  Office of Legal Affairs/CARI Unit  P.O. Box 717-4th Floor  Trenton, NJ 08625-0717  Phone: : 855-744-4913  State Central Registry:  877 NJ ABUSE (877) 652-2873 | Form Required:  For the purposes of requesting CPS history, requests should be made in writing on agency letterhead.  <https://www.nj.gov/dcf/reporting/how/> |
| *NEW MEXICO* | CYFD  Protective Services PO Drawer 5160 CRC Unit Room 225  Santa Fe, NM 87502-5160  Phone: 505-827-8400  Email:  [cyfd.pscriminalreco@cyfd.nm.us](mailto:cyfd.pscriminalreco@cyfd.nm.us)  New Forms and Additional Information Located Here: <https://cyfd.org/for-providers/info-and-manuals> | Due to the Coronavirus pandemic in New Mexico at this time, CYFD is not receiving physical mail - Please send all applications and requests via e-mail.  ****Adam Walsh Abuse and Neglect Checks****   * **For CPS History use the PDF Named** [Disclosure of Confidential Information](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fcyfd.org%2Fdocs%2FDisclosure_of_Confidential_Information_FormBGCU.pdf&data=04%7C01%7Ccentersupport%40usf.edu%7C64d21ef0e20e4c1b1c7b08d8d4fb54d6%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637493523214886750%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0&sdata=tg3TERnnhNJDr5DHy26zQ%2FogfW6zDl%2FOtMM26GYAkJU%3D&reserved=0) **and send to** [SCI.LEReports@state.nm.us](mailto:SCI.LEReports@state.nm.us)**.** * **For Out of State Foster and Adoption use PDF Named the** [NM Abuse and Neglect Form](https://nam04.safelinks.protection.outlook.com/?url=http%3A%2F%2Fcyfd.org%2Fdocs%2FNM_Abuse_and_Neglect_Check_Form.pdf&data=04%7C01%7Ccentersupport%40usf.edu%7C64d21ef0e20e4c1b1c7b08d8d4fb54d6%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637493523214896745%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0&sdata=fHEES4aHocTy21cmgUYiBl%2FNuexKulvokMBlxTFis9c%3D&reserved=0) **and Email to** [CYFD.PSCriminalReco@state.nm.us](mailto:CYFD.PSCriminalReco@state.nm.us) * **For Employment please email** [CYFD.BCU@state.nm.us](mailto:CYFD.BCU@state.nm.us)**and use their form.** [2020 NM ABUSE NEGLECT CHECK REQUEST](https://nam04.safelinks.protection.outlook.com/?url=http%3A%2F%2Fcyfd.org%2Fdocs%2F2020_NM_ABUSE_NEGLECT_CHECK_REQUEST.DOCX&data=04%7C01%7Ccentersupport%40usf.edu%7C64d21ef0e20e4c1b1c7b08d8d4fb54d6%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637493523214906739%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0&sdata=Z1Le2kGEjtQhAN793unhvIftQEOr6mgdxGDgnXgSiBc%3D&reserved=0)**[DOC]** |
| *NEW YORK* | Office of Children & Family Services  New York State Central Register  P.O. Box 4480 Albany, NY 12204  Phone: 518-474-5297  Fax: 518-402-2614 | Form Required:  Search “Adam Walsh” in the search box on this page: <http://ocfs.ny.gov/main/documents/docsKeyword.asp>  For child care providers: <https://ocfs.ny.gov/forms/ocfs/OCFS-7076.dotx>  Form must be signed and notarized.  Please submit via fax with the attached below:   * The records are necessary for an ongoing child protective investigation * The records will only be used for the stated purpose * The records will not be re-disclosed |
| *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://policies.ncdhhs.gov/divisional/social-services/forms/dss-5268-responsible-individuals-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 Services  Children & Family Services 600 E. Boulevard Avenue, Dept 325  Bismarck, ND 58505  Email: [dhscfs\_cani@nd.gov](mailto:dhscfs_cani@nd.gov)  Fax: 701-328- 0358.  Phone: 701-328-2316 | Form Required: For the purposes of requesting CPS history for an open investigation, request can be made on agency letterhead and e-mailed or faxed.  For other CA/N Index checks, applicants are required to complete a form: <https://www.nd.gov/eforms/Doc/sfn00433.pdf>  Submit via email or fax |
| *OHIO* | Ohio SACWIS Registry  Ohio Dept. of Job & Family Services  Office of Families & Children PO Box 183204  Columbus, OH 43218-3204  Phone: 614-752-1298  Fax: 614-728-6726 | 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 track the progress of a request.  Link to create an ID and submit request: [https://ap.jfs.ohio.gov](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fap.jfs.ohio.gov&data=02%7C01%7Ccentersupport%40usf.edu%7C3f029c328c6d430905a208d77e7813a9%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637116927215485702&sdata=tpQ2nHQN6Z3OwGUDQ46kQCDdLZK4%2BgQ4qwUAUbUPrrY%3D&reserved=0)  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](mailto: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  Human Services  Background Check Unit  P.O. Box 14870 Salem, OR 97309  Phone: 503-378-5470  or 888-272-5545  Fax: 503-378-6314  Attn: Adam Walsh Coordinator Email:  [Adam-Walsh.Oregon@dhsoha.state.or.us](mailto:Adam-Walsh.Oregon@dhsoha.state.or.us) | • Form can be located here:  <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](mailto: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](mailto:DHS.RecordsRequest@dhsoha.state.or.us)  Local office contact information found at: <http://www.oregon.gov/DHS/Offices/Pages/Child-Welfare.aspx>. |
| *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.  Additional Info: <http://www.keepkidssafe.pa.gov/resources/clearances/pachildhistory/index.htm> | The Pennsylvania Child Abuse History clearance can be submitted and paid for online through the [Child Welfare Information Solution (CWIS) self-service portal.](https://www.compass.state.pa.us/cwis/public/home) 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](https://www.compass.state.pa.us/cwis/public/home).  Form CY113: <http://www.keepkidssafe.pa.gov/cs/groups/webcontent/documents/form/s_001762.pdf>  Cost: $13 |
| *PUERTO RICO* | Directora Centro Estatal PO Box 194090  San Juan, PR 00919 Phone: 787-625-4900  E-mail contacts:  Lisa M. Agosto Carrasquillo [lmagosto@familia.pr.gov](mailto:lmagosto@familia.pr.gov) or  Damaris Medina Ramos [dmedina@familia.pr.gov](mailto: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](http://www.centerforchildwelfare.org/ChildProtective/puerto-rico.pdf) |
| *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](mailto: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 known. * Payment in the amount of is $10 can be sent electronically via: [https://www.ri.gov/DCYF/clearancerequest/ [nam04.safelinks.protection.outlook.com]](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Furldefense.com%2Fv3%2F__https%3A%2Fnam04.safelinks.protection.outlook.com%2F%3Furl%3Dhttps*3A*2F*2Fwww.ri.gov*2FDCYF*2Fclearancerequest*2F%26data%3D04*7C01*7Ccentersupport*40usf.edu*7C1d5fb2ea45754639ff4a08d9a48f883b*7C741bf7dee2e546df8d6782607df9deaa*7C0*7C0*7C637721758645721340*7CUnknown*7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0*3D*7C1000%26sdata%3DeBgkH*2B29bER*2B0mxzXAgMSWxdi7fJ0*2FAHag2*2FDeJmHM0*3D%26reserved%3D0__%3BJSUlJSUlJSUlJSUlJSUlJSUlJSUlJSU!!KKphUJtCzQ!bVi9Ji8Yk5oy_hWjIIZZQyB2S47e-Fw-EsmTyYHtsrDNwXEZ_uNeZk2AWcuKxA8S2bCrNgI%24&data=04%7C01%7Ccassandrat%40usf.edu%7Cd66574e2766d47a6ed6f08d9a4915d80%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C637721766514848703%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=IR1gYJex4KF1kXFcYmvHdgglyx9nLC%2FPBZeGh5xcIhs%3D&reserved=0) * 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](mailto: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-](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdss.sc.gov%2Fmedia%2F1753%2Fdss-form-3072_rev-may-18.pdf&amp;data=02%7C01%7Ccassandrat%40usf.edu%7C26b4b2955199442eb3a708d64414b0b6%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C636771252985251849&amp;sdata=ct0iORHkwiUlD45IRsYFlumdngBj6icDRUSjqblrRic%3D&amp;reserved=0) [may-18.pdf](https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdss.sc.gov%2Fmedia%2F1753%2Fdss-form-3072_rev-may-18.pdf&amp;data=02%7C01%7Ccassandrat%40usf.edu%7C26b4b2955199442eb3a708d64414b0b6%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C636771252985251849&amp;sdata=ct0iORHkwiUlD45IRsYFlumdngBj6icDRUSjqblrRic%3D&amp;reserved=0)  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/](https://dss.sc.gov/contact/) [cps/cr/index.aspx](https://dss.sc.gov/contact/) |
| *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 | Submit requests by mail to: DSS-Division  Child Protection, 910 E Sioux Ave  Pierre, SD 57501-2291 or  email:  [DSSCRS@state.sd.us](mailto:DSSCRS@state.sd.us)  Screening Request Form:  <https://dss.sd.gov/formsandpubs/docs/ABUSE/CPS-501_Individual_Request_for_Screening.pdf>  Central Registry of Child Abuse & Neglect Information Brochure <https://dss.sd.gov/formsandpubs/docs/ABUSE/CentralRegistry.pdf> |
| *TENNESSEE* | Email: [EI\_DCS\_CPS\_CentralRegistryC](mailto:EI_DCS_CPS_CentralRegistryCheck@tn.gov) [heck@tn.gov](mailto:EI_DCS_CPS_CentralRegistryCheck@tn.gov)  Additional Information may be available online: <https://www.tn.gov/dcs/program-areas/qi/cps-history.html>  On the subject line of the email request, please indicate “Out of State Request” along with the applicant’s first initial and last name.  Form Required: Tennessee DCS Database Search Results form Available on this page: <https://files.dcs.tn.gov/forms/0741.docm> | For all requests for database searches referencing Adam Walsh Child Protection and Safety Act of 2006 as the mandate allowing for the sharing of CPS background check results, please submit to [EI\_DCS\_CPS\_CentralRegistryCheck@tn.gov](mailto:EI_DCS_CPS_CentralRegistryCheck@tn.gov), the following information:  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).  \*\*NOTE: some agencies have open-ended dated licenses.  For licenses indicating and effective status of more than 6 years (2015 and prior) please submit a copy of any notice that might have been provided by your licensing agent indicating that your license is in good standing. 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”. |
| *TEXAS* | CBCU TX Abuse Neglect BGC,  M/C 4111  701 W 51st St.  Austin, TX 78714  Phone: 1-800-645-7549  Fax: 512-339-5829  Email: [TXAbuseNeglectBGC@dfps.st](mailto:TXAbuseNeglectBGC@dfps.state.tx.us) [ate.tx.us](mailto: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/sho](http://www.dfps.state.tx.us/Application/Forms/showFile.aspx?NAME=F-500-2970.pdf) [wFile.aspx?NAME=F-500-2970.pdf](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:  801-538-4100 or  801-538-4171  Fax: 801-538-3993  If unable to e-mail, the completed form can be faxed or mailed. | Form Required: [https://dcfs.utah.gov/wp-content/uploads/2019/09/ChildAbuseCentralRegistryRequest-0919.pdf](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdcfs.utah.gov%2Fwp-content%2Fuploads%2F2019%2F09%2FChildAbuseCentralRegistryRequest-0919.pdf&data=02%7C01%7Ccentersupport%40usf.edu%7C3769d9a71ae44e4d2ab908d7c43739e2%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C1%7C637193613782888815&sdata=lMwyvenk3t2%2FvNV4nH58JCZvf09IfsK%2FYVnMb%2FKDeAU%3D&reserved=0)  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](mailto:dcfscentralregistry@utah.gov)  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: 802-241-9010  Fax: 802-241-0919  [rose.neddo@vermont.gov](mailto:rose.neddo@vermont.gov) | A signed Vermont State Release is required with the request for the background check.  Please send your request on your Agency’s letterhead with name, alias’ and DOB to: [rose.neddo@vermont.gov](mailto:rose.neddo@vermont.gov) or fax it to: 802-241-0919 |
| *VIRGIN ISLANDS* | Department of Human Services Children & Family Services 1303 Hospital Ground Knud Hansen Complex Building A St. Thomas, VI 00802  **Phone: (340) 473-5794** | Form Required:  Email a request on letterhead to: [Natalie.lewis@dhs.vi.gov](mailto:Natalie.lewis@dhs.vi.gov%20) |
| *VIRGINIA* | Virginia Department of Social Services  Office of Background Investigations - Central Registry Search Unit  801 E. Main Street, 6th Floor  Richmond, VA 23219  CONTACT:  Kristen Eckstein, Program Manager  [crs\_operations@dss.virginia.gov](mailto:crs_operations@dss.virginia.gov) | Provider Portal for Electronic Submissions:  ALL OUT OF STATE AGENCIES SHOULD REGISTER AS AN EMPLOYER OR INDIVIDUAL  FEE: $10 payable online only <https://centralregistry.dss.virginia.gov/crs/s/?language=en_US>   * \*Physical Form No longer accepted |
| *WASHINGTON* | Department of Children, Youth, and Families  1310 Jefferson ST SE  P.O. Box 40993  Olympia, WA 98504  Email:  [canhistorychecks@dcyf.wa.gov](mailto:canhistorychecks@dcyf.wa.gov)  Phone: 1-800-998-3898 (option 1)  Fax: 1-206-341-7930  **Before submitting a Non-CPS Out of State application on the portal, please make sure to read the appropriate portal training guides available on our website.** | Current information and instructions for submitting WA CAN checks is provided on the website at:  <https://www.dcyf.wa.gov/safety/can-founded-findings/history-checks>  Email requests to:  [canhistorychecks@dcyf.wa.gov](mailto:canhistorychecks@dcyf.wa.gov) or Fax to 206-341-7930  Although paper applications are still being accepted until further notice, all users are encouraged to transition to the CAN History Check Portal. |
| *WEST VIRGINIA* | Original form should be submitted via mail to:  Bureau of Children and Families  350 Capitol Street, RM 691  Charleston, WV 25301  Phone: Amber Miller @ 304-352-4513.  Children and Adult Services: 304-352-4429. | Form Required:  Foster/Adoption  [https://dhhr.wv.gov/bss/policy/Documents/Adoption%20Foster%20Background%20Check%20Form%2011.4.2021.pdf](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdhhr.wv.gov%2Fbss%2Fpolicy%2FDocuments%2FAdoption%2520Foster%2520Background%2520Check%2520Form%252011.4.2021.pdf&data=05%7C01%7Ccentersupport%40usf.edu%7Ca9527296545a47da7a1708da6a60ee6b%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C637939261785319698%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=mb5tRrsHXjMchezMu%2Bbzg6I04ojUdygaR2x5nY3V784%3D&reserved=0)  Child Care  [https://dhhr.wv.gov/bss/policy/Documents/Form-AUTHORIZATION%20RELEASE%20RECORD%20CHECK%20Agency%20updated%2011.4.2021.pdf](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdhhr.wv.gov%2Fbss%2Fpolicy%2FDocuments%2FForm-AUTHORIZATION%2520RELEASE%2520RECORD%2520CHECK%2520Agency%2520updated%252011.4.2021.pdf&data=05%7C01%7Ccentersupport%40usf.edu%7Ca9527296545a47da7a1708da6a60ee6b%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C637939261785319698%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=NIqedoqiOzo3BnoLHjzOLt34sdzb85A5Yg2iHI8sgkM%3D&reserved=0) |
| *WISCONSIN* | Department of Safety and Permanence  201 E. Washington Street Madison, WI 53703 Email: [CWBckgrdRequests@wiscons](mailto:CWBckgrdRequests@wisconsin.gov) [in.gov](mailto: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.doc](https://dcf.wisconsin.gov/files/forms/doc/5065.docx) [x](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  Central Registry  2300 Capitol Ave, 3rd Floor Cheyenne, WY 82002 | Paper forms are no longer accepted, and individuals must use the online portal at:  <https://dfs.wyo.gov/about/central-registry/> |