

REQUEST FOR CHILD ABUSE/NEGLECT CENTRAL REGISTRY and DPS CRIMINAL HISTORY CHECK

The Texas Department of Family and Protective Services (FPS) operates a Central Registry that identifies persons whom FPS has found to have abused or neglected children. Designated agencies use this form to forward requests for Central Registry checks and DPS Criminal History checks. Requestors have a right to know what information is provided and to correct any incorrect information.

Texas Department of Family and Protective Services

Elsa L. Mathis
System Support Specialist
503 Priest Drive
Killeen, TX 76542
524-200-4260

REQUIRED IDENTIFYING INFORMATION ON REQUESTER - The requester must provide all of this information in order for a check to be made:

| | | | | | |
|---|--|---------------|---|---|-------------------|
| First Name | | Middle Name | | Last Name | |
| Other names or spellings used (married, maiden, alias, etc.) - First, Middle, Last (continue on back as needed) | | | | | |
| Residence Street Address | | | City | County | State Zip Code |
| Residence Telephone No. (A/C) | | Date of Birth | | Gender : <input type="checkbox"/> Male - <input type="checkbox"/> Female | SSN |
| Race (check all applicable) <input type="checkbox"/> Am Indian/AK Native <input type="checkbox"/> Nat Hawaii/Pacis <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Unable to Determine | | | Ethnicity (check one, only) <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic <input type="checkbox"/> Unable to Determine | | |
| List other places you have resided (for a minimum of the past 5 years - continue on back as needed) | | | | | |

| | |
|---|--|
| <p>SEND RESULTS OF REQUESTED CHECKS TO: <input type="checkbox"/> Requester, OR <input checked="" type="checkbox"/> Designee - Name of Designee: Julie Laughlin, Program Director</p> <p>Please check below to indicate Agency the Designee Represents: CASA of Parker County Mailing Address of Designee (City, State, Zip): 200 Palo Pinto Weatherford, TX 76086 817-599-6224 Email Address: JulieLaughlin@casaofparkercounty.com</p> | <p>RESULTS OF CENTRAL REGISTRY CHECK: FPS returns the results of the Central Registry checks to the <u>requestor or designee</u> indicated to the left. The requester is entitled to have the results provided to him or to designate another person or entity to receive <u>the results</u>.</p> <p><u>NOTICE - NOTICE - NOTICE:</u> The requester may not have exhausted all opportunities to contest findings in the Central Registry. Therefore, a requester who designates another person/entity to receive the results of the check is <u>hereby provided notice and cautioned</u> that if he or she disagrees with any such findings, that he or she may have the right to challenge any such findings, and that he or she is authorizing FPS to release any such findings to a third party prior to or during any challenge to the accuracy of those findings.</p> |
|---|--|

| | |
|--|--|
| Type of Agency: | |
| <input type="checkbox"/> a Texas affiliate of Big Brothers/Big Sisters of America | <input type="checkbox"/> a Texas chapter of the Make-a Wish Foundation of America |
| <input type="checkbox"/> the "I have a Dream/Houston" program | <input type="checkbox"/> a local affiliate of Children's Advocacy Centers of Texas |
| <input checked="" type="checkbox"/> an organization providing Court-Appointed Special Advocates for abused/neglected children (CASA) | |

Signature of Requester _____ Date of Request _____

SUBSCRIBED AND SWORN TO before me this ____ day of _____, _____.

[Notary stamp or seal]

Notary Public

| | | |
|--|---|-----------------------------|
| DPS Criminal History Check Requested? (for designated agency use only) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
|--|---|-----------------------------|

**REQUEST FOR CHILD ABUSE/NEGLECT
CENTRAL REGISTRY and DPS CRIMINAL HISTORY CHECK**

FPS Response for requested DPS checks:

- Yes – The results of the Criminal History check are attached
 No – FPS did not receive a criminal history from DPS on the person requested.

FORMS INSTRUCTIONS:

Purpose - to provide a form which can be used to request a child abuse and neglect records check from the FPS Central Registry of Child Abuse and Neglect, as well as a DPS Criminal History check. This form is for use by designated agencies to provide for DPS and Central Registry Checks for their applicants, staff and volunteers.

When to Use – Designated Agency staff provide to their applicant, staff, and volunteer requesters. Once the form is filled out and notarized, it is sent to the local contact at FPS.

FPS Response to Form 2970da When It Is Submitted – FPS staff review the submitted form for completeness. If not complete and notarized, FPS staff return the form to the requester for completion. If the form is complete and notarized, FPS staff request DPS and Central Registry checks through CLASS. If a match is found in the Central Registry, a report is generated and sent, along with any DPS result. If no match is found in the Central Registry, a report so stating will be sent with any DPS results. FPS staff send the printed form to the requester or his/her designee, as indicated.

Retention - Form 2970da and a copy of the response are to be retained by FPS for three years in administrative files, then destroyed in a manner consistent with observing the confidentiality of case and person information obtained from the Central Registry.

DETAILED INSTRUCTIONS

Required Identifying Information on Requester:

First, middle, last name - The requester enters his/her legal name. Note: if the requester does not have a middle name, leave the 'Middle Name' field blank.

Other Names or Spellings Used - First, Middle, Last - The requester enters his/her married name(s), maiden name, alias(es), name(s) he/she uses every day, etc., if different from legal name.

Residence street address, city, county, state, zip code - The requester enters this information on current primary residence.

Telephone number (A/C) - The requester enters primary telephone number, including the area code. If none, leave blank.

Date of Birth - The requester enters birth date.

Gender - The requester checks the box that represents the appropriate gender.

SSN - The requester enters social security number.

Race/Ethnicity - The requester checks the boxes that represent his/her race and ethnicity.

List other places you have resided (for a minimum of the past 5 years) - The requester enters the names of all the Texas cities where he/she has resided for at least the past 5 years, other than the current primary residence given above. If none, leave blank.

Send Results of Requested Checks to: Requester OR Designee - Name of Designee and Agency Designee Represents - At Mailing Address, Email Address - The requester checks the appropriate box to indicate whether he/she wants the results of the central registry check sent directly to him/her or to a designee. If to a designee, the requester enters the name of the designee, the agency the designee represents and the mailing and Email addresses to which the results of the central registry check are to be sent. Email addresses may facilitate more timely response to requests. DPS results will be sent to a designee, only.

Signature of Requester - The requester signs the form before a notary public.

Date of Request - The requester enters the date form was signed.

Subscribed and Sworn to Before Me this _____ day of _____ - Notary Public - Notary stamp or seal - The notary provides the information and signs and stamps/seals the form.

DPS Criminal History Check Requested – A representative of the Designated Agency providing the form should indicate whether a DPS Criminal History check is also being requested. DPS checks will be sent to Designees only.

**REQUEST FOR CHILD ABUSE/NEGLECT
CENTRAL REGISTRY and DPS CRIMINAL HISTORY CHECK**

FPS Response - This is for FPS use only when a DPS Criminal History check has been requested by a Designated Agency along with the Central Registry check.