



Out-of-State: Child Welfare Record Request for Child Care Personnel Employment

I _____
Last, First Middle

as an applicant for employment in child care authorize a search for reports of abuse, neglect or abandonment investigated in which my name appears and there were "verified findings" of maltreatment of a child(ren) and I am listed as the "Caregiver Responsible". I understand I will be given the opportunity to discuss the findings of the report(s). This consent is valid solely for the requesting employer/agency/facility listed below on this form. (Chapter 39, F.S., Child Care and Development Block Grant Reauthorization, P.L. 113-186.

Applicant Signature: _____ Date: _____ Phone: _____

NOTE: This form must be submitted to the Department of Children & Families. **Only one applicant per release.**

Applicant: SSN: _____ DOB: _____ Race: _____ Sex: _____ Prior Name(s), including Maiden: _____

Was the applicant a resident of the State of Florida within the past 5 years? YES NO

Current non-Florida Address:

(Include city, state, and Zip Code)

Previous Address:

_____ FL _____ Dates: _____

Previous Address:

_____ FL _____ Dates: _____

Reason for Record Search:

Employment in child care

TO BE COMPLETED BY REQUESTING AGENCY

Child Care Employer State/Local Child Welfare Agency

Other: _____

Facility/Agency Name: _____

Address: _____
Mailing Address City State Zip Code

Representative/Contact Name: _____

Phone: _____ Fax: _____ Email: _____

I understand it is a misdemeanor of the first degree for any agency to use or release abuse, neglect or abandonment information to others. The information is **CONFIDENTIAL** and may be used only for the purpose for which it was obtained.

Printed Name and Signature of Requesting Facility/Agency Representative

 Date

Please return to DCF via email: CWR.Employment.Requests@myflfamilies.com
 Attention: Child Welfare Record Request