REQUEST FOR TEXAS CHILD ABUSE/NEGLECT CENTRAL REGISTRY

CHIEF OPERATING OFFICER – CENTRALIZED BACKGROUND CHECK UNIT (CBCU)

Purpose: An individual may use this form to request a Texas Department of Family and Protective Services Central Registry Abuse and Neglect check on him or herself.

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.

Directions: The subject of the background check must read and complete Sections 1-5, then notarize and email, fax, or mail this form using the contact information below. Please type or print clearly in ink.

Incomplete or illegible forms will not be processed.

Email: TXAbuseNeglectBGC@dfps.state.tx.us
FAX: 512-339-5829

Mail: CBCU TX Abuse Neglect BGC, M/C 121-7
PO Box 149030, Austin, TX 78714-9030

Typically, DFPS provides the background check results within 30- 40 days of receipt. If you have questions, email: TXAbuseNeglectBGC@dfps.state.tx.us

SECTION 1: CENTRAL REGISTRY INFORMATION

As required by Texas Family Code §261.002, DFPS maintains a central registry of the names of persons found by DFPS to have abused or neglected a child. The DFPS Central Registry includes information gathered during Child Protective Services (CPS), Child Care Licensing (CCL), and Adult Protective Services (APS) in-home and provider investigations of child abuse and neglect that resulted in a disposition of "reason to believe" for CPS and CCL cases or "confirmed and validated" for APS cases. (Findings of abuse, neglect, or exploitation of an adult victim are not included in the Central Registry.)

You will not clear the Central Registry check if you:

- Have the role of designated perpetrator or sustained perpetrator in an investigation included in the registry; **or**
- Are involved as an alleged perpetrator in an open child abuse or neglect investigation being conducted by DFPS.

(A new Central Registry check may be requested at the conclusion of the investigation to determine if you were designated as a perpetrator of child abuse or neglect.)

SECTION 2: PURPOSE OF CENTRAL REGISTRY CHECK

Please select the reason you are requesting the background check:

☐ Placement of a child:
- ☐ Foster Care/Foster Parenting or Adoption (in compliance with the Adam Walsh Child Protection Act)
- ☐ Kinship
- ☐ Adoption (step parent, private, international, etc)
- ☐ Other: Specify reason: _____

☐ Child Care/Day Care/Head Start Employment (in compliance with Child Care and Development Block Grant (CCDBG) Act of 2014) and not regulated by Texas Childcare Licensing

☑ Employment/Volunteer
Name of employer/agency:
_____

☐ Other: Specify the reason for the request for central registry check:
_____

☐ Child Custody or Adoption Evaluation (see section 7 for definition)
(*This option is not applicable to any public child welfare/child protection agency requests*)

SECTION 3: SUBJECT OF THE BACKGROUND CHECK

Please indicate N/A for sections that are not applicable.

First Name:	Middle Name (no initials): ☐ No Middle Name	Last Name:

List any other name combinations you use or have used in the past, including married and maiden names below. If you do not provide every name, you may receive inaccurate results.

Other First Names

Other Middle Names:

Other Last Names:

Current Mailing Address:	City:	State:	Zip Code:

Social Security Number:	Date of Birth:	Sex: ☐ Female ☐ Male	Telephone number:

Ethnicity:	Race:	
☐ Hispanic	☐ White	☐ Asian
☐ Non-Hispanic	☐ Black	☐ American Indian/Alaskan Native
	☐ Native Hawaiian/Pacific Islander	

List any other city in Texas where you have lived (attach separate page as needed).

SECTION 4: RELEASE OF RESULTS

As the subject of the request, you have the right to receive the results of this check and to share them with any third party. If this section is blank, DFPS will assume you do not want a copy of the results. If you would like a copy of the results sent to you, please select the appropriate box.

☐ Subject's Email (preferred method): _____

☐ Mail (results will be sent to the mailing address listed in section 3).

SECTION 5: DESIGNEE

If the check results are clear, you, as the subject of the background check request, can list another person in the space below to whom DFPS will send the cleared results.

Exception for employment or volunteering: For request purposes related to employment or volunteering, DFPS **cannot** release the results to any person other than you. Do not list a designee below if your request is for employment or volunteering purposes. If your request is for employment or volunteering purposes, be sure you indicated how you want your results sent to you in the box above.

However, **if the check results in a match**, DFPS will **only** send the results directly to the subject of the request.

Exception for a child custody or adoption evaluation: If the only exception would be if the request is submitted for a court ordered child custody or adoption evaluation as defined by the Texas Family Code (see Section 7 for complete detail). The court ordered evaluator must enter his or her information below to receive the results. **Exception for Adam Walsh and CCDBG requests**: A designee that is a representative of another state agency required to comply with the federal law of the Adam Walsh or CCDBG may receive a copy of the results if a copy of the designee's state employment ID is included with the request.

Agency/Organization Name:	Contact Name:	Title:
NDDHS, Children & Family Services		

Email Address:	Telephone Number:
dhscfscbc@nd.gov	701-328-2316

SECTION 6: SIGNATURES

This section of the form must be signed by the subject of the background check and not the designee. This form must be signed in the presence of the Notary Public.

- I am the person listed above in Section 3 of this form. The information in this document is correct. I understand that providing false information is a violation of Texas Penal Code §37.10.
- If applicable, I grant permission for the results of my cleared Child Abuse/Neglect Central Registry check to be transmitted to the designee I listed in Section 5.
- I acknowledge that DFPS cannot guarantee that information transmitted electronically is secure and accessible only to approved parties.

Subject: X	Date Signed:
Print Name:	

SUBSCRIBED AND SWORN TO before me this____ day of_____ ,_____ .

[**Notary stamp or seal**]

_____
Notary Public

SECTION 7: CHILD CUSTODY OR ADOPTION EVALUATORS

If you are a child custody or adoption evaluator as defined in Texas Family Code §§107.101 or 107.151, you may submit this form without the subject's signature and notarization **if** you include a copy of the court order. The evaluator's information must be entered in the designee section under section 5 of this form. Case workers, case managers, or other staff working with DFPS, and out of state public child welfare, child protection, or child placing agencies are **not** considered child custody or adoption evaluators for purposes of this form.

DFPS may require child custody or adoption evaluators who meet certain requirements under Texas law to provide valid picture identification and the court order identifying the evaluator as the authenticated designee before DFPS will release results.

SECTION 8: PRIVACY STATEMENT

DFPS values your privacy. For more information, read our privacy policy. (http://www.dfps.state.tx.us/policies/privacy.asp)