



**CABINET FOR HEALTH AND FAMILY SERVICES**  
**Department for Community Based Services**  
**Division of Child Care**

**Andy Beshear**  
Governor

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**Eric C. Friedlander**  
Secretary

**Lesa Dennis**  
Commissioner

**Parental Authorization to Complete Comprehensive Background Check**

In accordance with KAR 922:280 Section 3, Subsection 5 anyone under the age of 18 must have the signature and consent of a parent/legal guardian to be a prospective child care staff member. Please complete the form below:

I, \_\_\_\_\_, parent/legal guardian of \_\_\_\_\_, hereby authorize the Division of Child Care (DCC) to conduct a comprehensive background check which will include the following:

- National FBI Fingerprint Criminal History Check
- NCIC National Sex Offender Registry Check
- In-State Criminal History Check
- In-State Sex Offender Registry Check
- In-State Child Abuse and Neglect Registry Check

Previous State(s) of residence within the last 5 years

- State Criminal History Check
- State Sex Offender Registry Check
- State Child Abuse and Neglect Registry Check

Additionally, I waive the right to claim this request as an invasion of privacy, as it is made with my explicit consent. I release DCC from any liability regarding the release of any criminal background history, abuse, or neglect information gathered in the comprehensive background check.

\_\_\_\_\_  
Parent/ Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship



PDFD June 12, 2024