



## REQUEST FOR CENTRAL REGISTRY AND CRIMINAL HISTORY BACKGROUND CHECKS

**Purpose:** Representatives of Big Brothers and Big Sisters of America and Children’s Advocacy Centers of Texas use this form to request the following background checks for potential and current volunteers, employees, and board members:

- A criminal history background check from the Texas Department of Public Safety (DPS).
- A child abuse and neglect Central Registry background check from the Texas Department of Family and Protective Services (DFPS).

**Directions:** The subject of the background check completes the following sections:

- *Section 1: Name*
- *Section 2: Other Personal Information*
- *Section 3: Previous Places of Residence*
- *Section 7: Signature*

The designee must do the following:

- Make sure the subject of the background check provided complete and accurate information in Sections 1, 2, and 3 and signed and dated Section 7. The designee verifies the information by viewing official documents provided by the subject of the check, such as a driver’s license or Social Security card.
- Complete *Section 4: Designee*.
- Enter the background check for the subject of the request in the Automated Background Check System (ABCS) for the associated account.

For additional questions, contact Background Checks at the following:

Email: [CACTXBGCREQUEST@dfps.state.tx.us](mailto:CACTXBGCREQUEST@dfps.state.tx.us)

Mail: DFPS Background Checks M/C 121-7; PO BOX 149030, Austin, TX 78714-9030

Fax: 512-339-5831

SECTION 1: NAME		
First Name:	Middle Name: <input type="checkbox"/> No Middle Name	Last Name:
Have you ever used any other first, middle, or last names (such as a nickname, a married or maiden name, or a different spelling for your name)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered <i>Yes</i> above, you must list every other name you have used.		
OTHER FIRST NAMES	OTHER MIDDLE NAMES	OTHER LAST NAMES



**SECTION 2: OTHER PERSONAL INFORMATION**

Home Street Address:		City:	State:	Zip Code:
County of Residence:		Date of Birth:		Phone Number:
Social Security Number (if no SSN, provide alternate document name and ID number)		Driver's License Number and State:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Unable to Determine <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander		

**SECTION 3: PREVIOUS PLACES OF RESIDENCE**

Have you lived outside the state of Texas in the past two years?  
 Yes    No

If you answered Yes above, list each place you lived outside of Texas within at least the past two years. Provide the complete address and the dates you lived there (continue on the back as needed).

FULL ADDRESS (INCLUDE CITY, STATE, AND ZIP CODE)	DATES (MM/YYYY – MM/YYYY)

**SECTION 4: DESIGNEE**

Full Name:	Email Address:
Name of the Organization the Designee Represents:	



**SECTION 5: NOTE TO THE SUBJECT OF THE BACKGROUND CHECK**

A person is listed in the DFPS Central Registry when all the following occur:

- The person has been investigated for child abuse or neglect by Child Protective Services (CPS), Child Care Investigations (CCI), or HHSC Provider Investigations.
- The investigation resulted in a disposition of *Reason to Believe* for CPS and CCI cases or *Confirmed and Validated* for HHSC Provider Investigations cases.
- The person is listed as a designated perpetrator or sustained perpetrator.

Cases involving adult victims are not included in the DFPS Central Registry.

In addition, a person will not clear the Central Registry check if that person is 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 end of the investigation to determine whether the person has been listed as a designated perpetrator on the DFPS Central Registry.

As the subject of this background check request, you have the right to review the results of this check. If the Central Registry identifies you as a person who has been found to have abused or neglected a child, DFPS only sends the results directly to you by mail or email. You have the option to share these findings with the organization listed above (see Section 4).

The criminal history check from DPS includes all Texas-based arrests and dispositions, including both convictions and cases with unknown dispositions. In some cases, the search produces juvenile criminal history results.

Information about unknown dispositions may not be current. If the results returned from DPS include an unknown disposition or to dispute the criminal history record, visit the [DPS Criminal History Error Resolution](#) webpage for more information on how to update the criminal history record.

**SECTION 6: PRIVACY STATEMENT**

DFPS values your privacy. For more information, read our [Privacy and Security Policy](#).

**SECTION 7: SIGNATURE**

**Only the subject of the background check can sign this form.**

I am the person listed above in Section 1 of this form. The information in this document is correct, and I am a prospective or current volunteer, employee, or board member of the organization listed in Section 4.

I agree to update the organization of any changes to the information above.

I give permission to the organization listed in Section 4 to request a Central Registry child abuse and neglect background check and a DPS criminal history background check, as well as any subsequent checks so long as I am active with that organization.

I authorize DFPS to send the results of this background check via email, and I acknowledge that DFPS cannot guarantee that information sent electronically is secure and accessible only to approved parties.

I understand that the information I am providing will be part of any request and that providing false information is a violation of Texas Penal Code Section 37.10.

By law, any information obtained through DFPS is confidential information and is personal in nature. I understand that I may have access to or may view confidential and sensitive information. I will not disclose confidential information to other people and under no circumstances will I intentionally access confidential information for any purpose other than in the performance of my assigned job duties.

Signature: <b>X</b>	Date Signed:
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**Disclosure and Consent to Release of Information  
Regarding Criminal or Abuse/Neglect History  
For Applicants, Employees or  
Volunteers of DFPS Contractors and Subcontractors**

Any person who will have direct contact with a Department of Family and Protective Services (DFPS) client or access to DFPS client information must complete this form.

- 1.** Have you ever been convicted of a felony or misdemeanor as an adult or juvenile? This includes offenses to which you pleaded guilty or no contest resulting in a deferred adjudication that has not yet been completed.  Yes  No

If yes, give details including date, location and nature of the offense and disposition for each such incident.

- 2.** Are you currently charged with (indictment or official criminal complaints by county or district court) a felony or misdemeanor?  Yes  No

If yes, give details, including date, location, and type of charge.

- 3.** Have you been or are you currently being investigated for allegedly abusing, neglecting, or exploiting a child, an elderly person, or a person with disabilities?  Yes  No

If yes, give details, including the state and county in which each such investigation occurred.

**I declare that the information provided on this statement is true and correct. I understand that any misrepresentation or omission of the information requested may result in my being barred from providing direct services or accessing DFPS client records under a contract with DFPS.**

**I also agree to inform the contractor, who will in turn notify the DFPS contract manager, if I am named in complaints, indictments, or convictions of offenses as described in items 1 & 2, or if I am investigated for allegations as described in item 3 of this form.**

**I grant permission to this contractor to request a DFPS Abuse/Neglect check, a Texas Department of Public Safety criminal history check, and (if applicable) a Federal Bureau of Investigation criminal history check using my identifying information.**

**I consent to DFPS' disclosure of any and all information, including confidential information, obtained from the above-referenced sources to the contractor listed below in order to facilitate my employment, subcontracting, or volunteer service with such contractor.**

\_\_\_\_\_  
**Printed Name of Person Completing Form**

\_\_\_\_\_  
**Signature of Person Completing Form**

\_\_\_\_\_  
**Date Signed**

Big Brothers Big Sisters  
\_\_\_\_\_  
Contractor's Name

24503233  
\_\_\_\_\_  
Contract #