



Criminal Background and Child Abuse and Neglect Registry Checks

Guide for Child Care Staff and Volunteers

October 2026

About the Background Check Process

- The following individuals must complete the criminal background check and child abuse and neglect registry check processes through the process mandated by the Office of the State Superintendent of Education (OSSE) prior to employment or volunteering at a child development facility in DC and every three years thereafter:
 - Child care providers
 - Current employees
 - Prospective employees
 - Volunteers
 - Individuals whose activities involve the care or supervision of children or unsupervised access to children (e.g., individuals older than 18 who reside in a child development home or expanded child development home)
- These individuals are collectively referred to as “child care staff” throughout this guide.

About the Background Check Process (cont.)

- The **criminal background check** must include a search of the National Crime Information Center's National Sex Offender Registry (NSOR), a Federal Bureau of Investigation (FBI) fingerprint check, and checks of state criminal registries and sex offender registries in every state the child care staff has lived in within the past five years.
- The **child abuse and neglect registry check** includes a search of state child abuse and neglect registries. Child care staff must complete a child abuse and neglect registry check in DC and each state they have resided in within the past five years.
- More information on is [available here](#).

How to Use this Guide

- Child care staff should follow the steps in this guide to complete the criminal background and child abuse and neglect registry check processes.
- **All child care staff** must complete the steps detailed in [Section 1](#), [Section 2](#), and [Section 5](#).
- Child care staff who currently reside in **Maryland** or resided in **Maryland** within the last five years must also complete the steps detailed in [Section 3](#) and [Section 6](#).
- Child care staff who currently reside in **Virginia** or resided in **Virginia** within the last five years must also complete the steps detailed in [Section 7](#).
- Child care staff who have resided in a **state other than DC, Maryland, or Virginia** within the last five years must also complete the steps detailed in [Section 4](#) and [Section 8](#).
- For questions, contact OSSE.ChildCareLicensing@dc.gov.

***Required for all child care staff**



Section 1

*Completing a criminal background check
using ApplicationStation*

Step 1: Access your unique link from ApplicationStation

- You will receive an email from applicationstation@truescreen.com. The email will include information on how to complete a background check from ApplicationStation.
- The email invitation includes a unique link that is specific to your case number. Do not share your unique link with others.
- **Click your unique link.** If the link does not work, copy and paste it into your browser.

Office of the State Superintendent of Education - Division of Early Learning has requested you provide authorization to Truescreen, Inc. to complete a background investigation. This investigation will NOT be started until you provide this information. To complete the forms, please follow the instructions below:

1. Click

<https://applicationstation.truescreen.com?t=BOBJckokhJpHEpra2rJiidy&requestcode=OSSE2000&clientCase...>

If the provided link does not work, please copy and paste the link into your browser.

2. Create an account using the Sign Up Now Button.

NOTE: If returning, please skip this step, use the account you created originally, and proceed to step 4.

3. After signing up, you will be asked to login with the credentials you created in Step 2.

4. Sign in using the account information you created in Step 2.

5. Follow the online instructions on the ApplicationStation Web Site, which will guide you through the process.

If requested, your ApplicationStation code is

If requested, your Case Reference Number is

If you have questions about the information you are being asked to provide, please contact an HR representative at the specific agency you will be working for. If you experience technical issues logging on to the ApplicationStation site, please contact ApplicationStation Support at 1-833-802-6381.

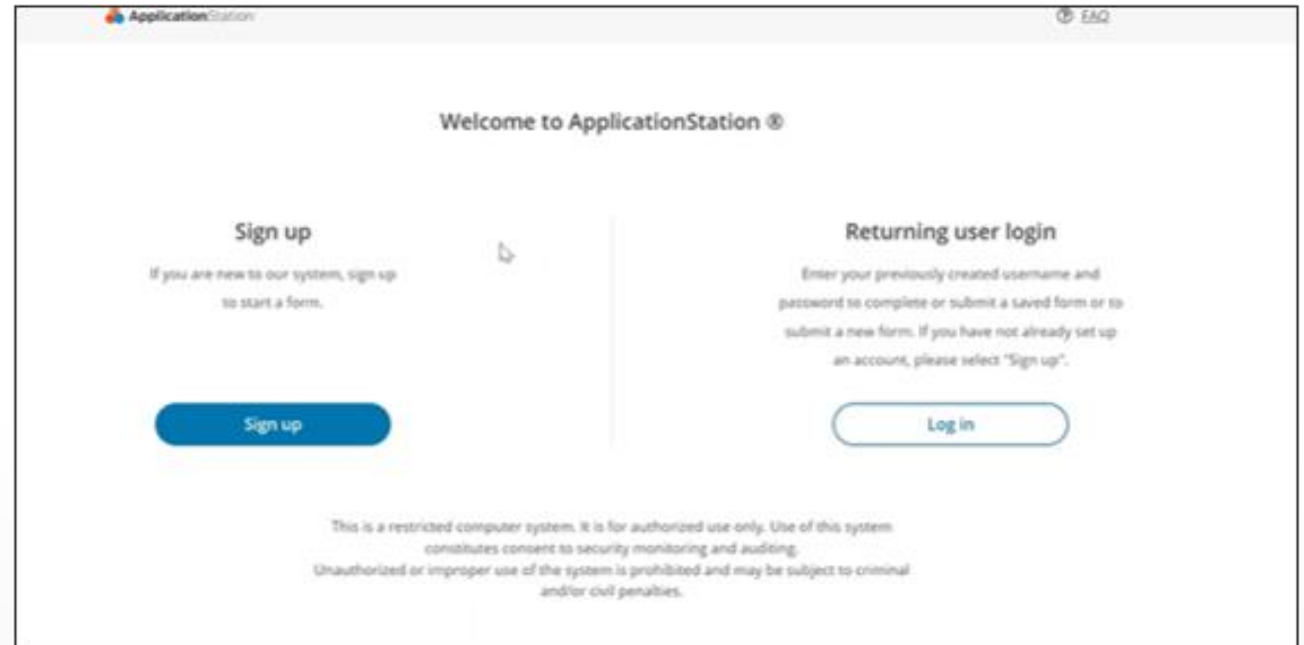
Thank You,

ApplicationStation

Click here

Step 2: Sign up or login

- After you click your unique link, you will be directed to the ApplicationStation login page.
- If it is your first time accessing ApplicationStation, click **Sign up** and proceed to step 3.
- If you have previously used ApplicationStation, click **Log in** and proceed to step 6.



Step 3: Consent Agreement

- Read the consent agreement and click **I agree**.

BY CLICKING ON THE "I AGREE" BUTTON BELOW, YOU ACCEPT THIS AGREEMENT AND ASSENT TO AND AGREE TO BE LEGALLY BOUND BY ITS TERMS AND CONDITIONS AS IF YOU HAD SIGNED A HARD COPY VERSION OF IT IN INK. IF YOU DECLINE THIS AGREEMENT, THEN CLICK ON THE "I DO NOT AGREE" BUTTON, AND YOU WILL NOT BE PERMITTED TO ACCESS OR USE THE SERVICE.

You can download the "Consent Agreement" as a PDF file.

 [Consent Agreement.pdf\(46 K\)](#)  [Download](#)

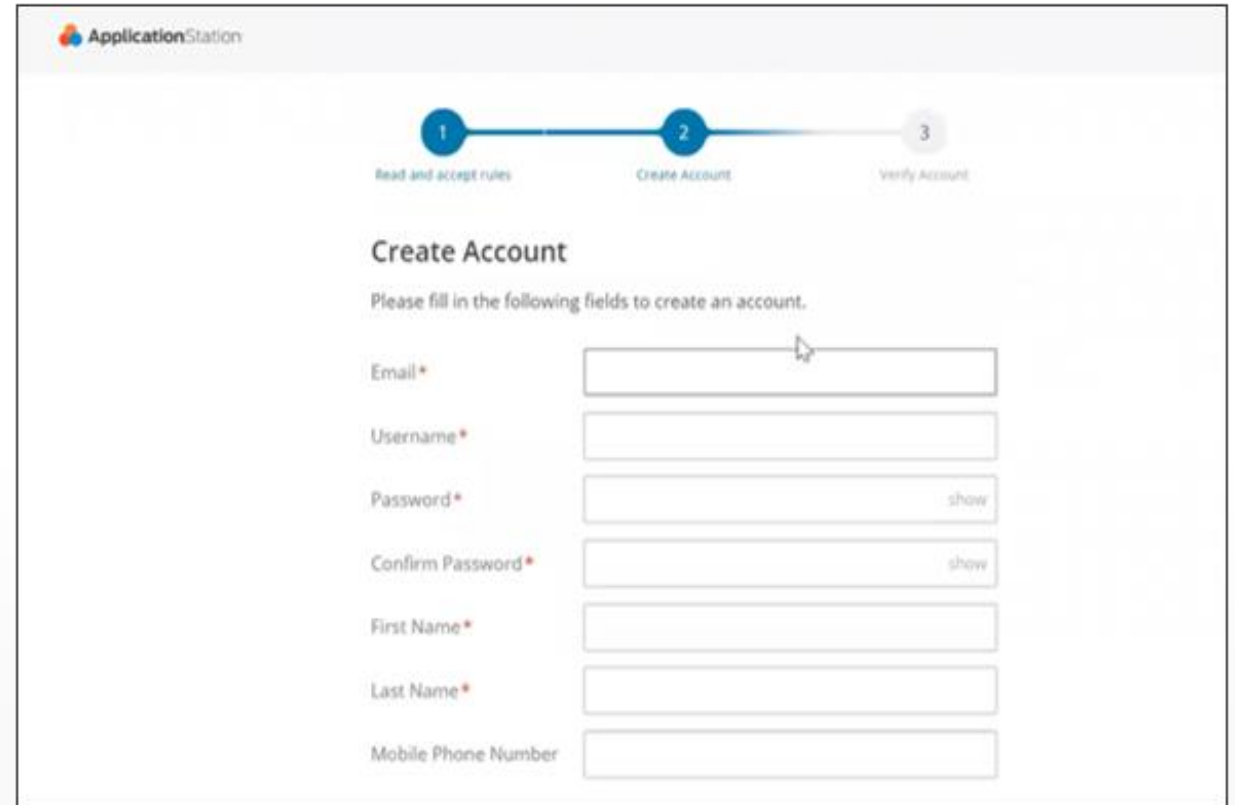
I do not agree

I agree

Click here

Step 4: Create Account

- Complete all fields:
 - Email
 - Username
 - Password
 - Confirm Password
 - First Name
 - Last Name
 - Mobile Phone Number
 - Note: To use SMS (text-message) two-step verification, enter a valid phone number.



The screenshot shows the 'ApplicationStation' logo at the top left. A progress bar at the top indicates three steps: 1. Read and accept rules, 2. Create Account (current step), and 3. Verify Account. The main heading is 'Create Account', followed by the instruction 'Please fill in the following fields to create an account.' Below this are seven input fields: Email*, Username*, Password*, Confirm Password* (each with a 'show' link), First Name*, Last Name*, and Mobile Phone Number. A mouse cursor is positioned over the Email input field.

Step 4 (cont.): Create Account

- Select three security questions and provide answers for each.
- Click **Continue**.

Security Questions

Please select three security questions and provide answers in the boxes below. Your answer(s) cannot contain your username, password, email address or security question.

Security Question 1 *

Select One ▼

Answer 1 *

show

Security Question 2 *

Select One ▼

Answer 2 *

show

Security Question 3 *

Select One ▼

Answer 3 *

show

Back

Continue

Step 5: Verify Account

- An email containing a verification code will be sent to the email address provided.
- Log in to your email to obtain the verification code.
- Enter the verification code, then click **Complete Registration**.

Verify Account

An email has been sent to your provided email address. The subject of the email will be "ApplicationStation Account Verification" and will arrive from email sender auth@verticalscreen.com.

Please follow the directions in the email to continue creating your account. You may need to check your Junk or Spam folder.

ⓘ Please do not close your browser.

If your browsing session closes, please log back in using your username and password and enter the 8-digit **Verification Code** emailed to you at the email address provided during account creation. This **Verification Code** will expire after 30 minutes.

Verification Code *

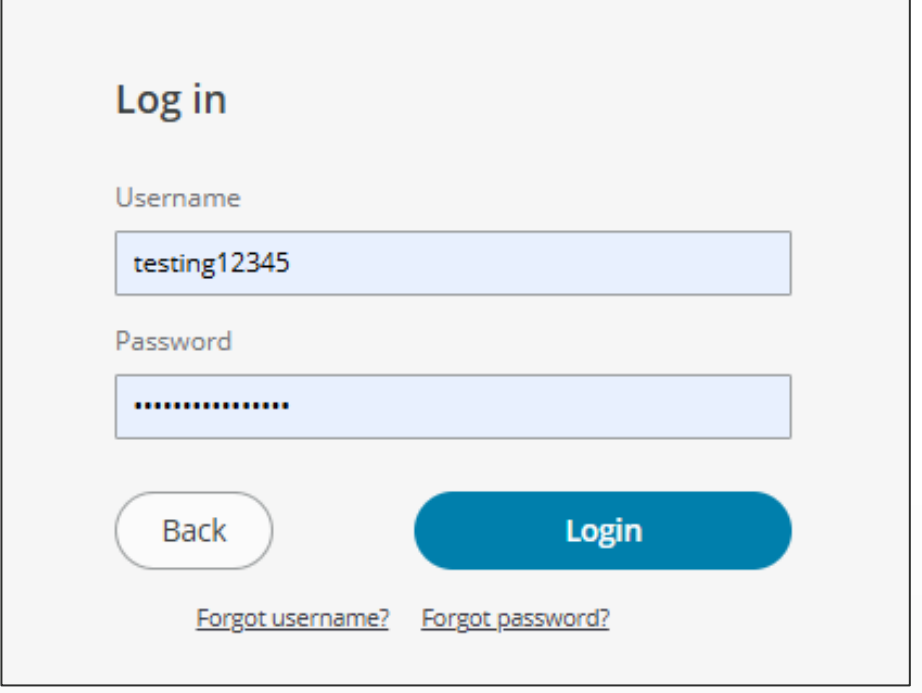
Didn't receive an email? Click [here](#) to resend email.

Complete Registration

**Enter verification
code here**

Step 6: Log In

- Insert your username and password.
- Click **Login**.
- Note: If you've forgotten your username or password, click **Forgot username?** or **Forgot password?** and follow the prompts.



The screenshot shows a login interface with the title "Log in". Below the title are two input fields: "Username" containing the text "testing12345" and "Password" containing a masked password represented by dots. Below the input fields are two buttons: a "Back" button and a blue "Login" button. At the bottom of the form are two links: "[Forgot username?](#)" and "[Forgot password?](#)".

Step 7: Two-Step Verification

- A verification code will be sent to the email address or mobile phone number you provided when you created your account.
- Enter the verification code and click **Continue**.

Two-Step Verification

For added security, input the verification code we sent to XXX-XXX-XX73.

Verification Code

Didn't receive the verification code? Click [here](#) to resend or choose another method.

 [Email](#)  [Receive a call](#)

☐ Don't ask again on this device/computer

Continue

Step 8: Forms

- After you log in, you will be brought to the Forms page. To start a new form, click **+ Start New Form**.
- If you are a returning user and want to finish completing a form you previously started, click **Continue**.

My Forms

Below you can view completed forms, continue with a previously started form or submit a new form.

If your form is In Progress - this means that it has not yet been submitted and can still be changed. Click on the Continue button to finish and submit the form.

If your form is Completed - this means it has been submitted and cannot be changed. Click on the View button to review the completed and submitted form.

Start a New Form - You are able to start a new form as long as you do not have one in progress for the same ApplicationStation Code. Click the Start New Form button to begin a new form.

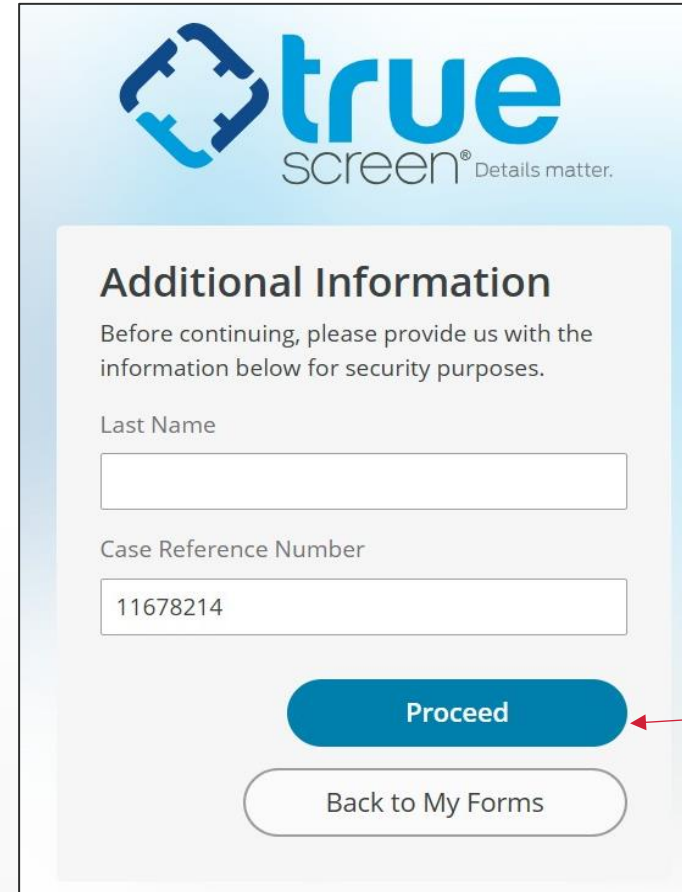
Forms

+ Start New Form

Click here

Step 9: Authorization Form

- Enter your last name.
- The case reference number will pre-populate.
- Click **Proceed**.



The screenshot shows the TrueScreen logo at the top with the tagline "Details matter." Below the logo is a section titled "Additional Information" with the instruction "Before continuing, please provide us with the information below for security purposes." There are two input fields: "Last Name" which is empty, and "Case Reference Number" which contains the value "11678214". At the bottom of the form are two buttons: a blue "Proceed" button and a white "Back to My Forms" button. A red arrow points from a "Click here" box to the "Proceed" button.

true
screen® Details matter.

Additional Information

Before continuing, please provide us with the information below for security purposes.

Last Name

Case Reference Number

Proceed

Back to My Forms

Click here

Step 10: Insert Your Personal Information

- Complete the Personal Information section. All fields with an asterisk are required.
 - First Name
 - Last Name
 - Country
 - Address
 - City/Town
 - State
 - ZIP Code
 - Resident Since
 - US Social Security Number (SSN), Canadian SIN, or Other Country ID
 - Date of Birth
 - Phone
 - Email
- Click **Save & Continue** →.

The screenshot shows the 'Personal Information' section of a web form. On the left is a sidebar with a 'Sections' menu containing: Personal Information (selected), Other Names, Other Addresses, Disclosure, State Disclosures, Authorization, and Criminal Background Check Affirmation Form. Below the menu are buttons for 'Attach Documents', 'Home Summary', 'Submit Forms', and 'Continuations'. The main form area has a title 'Personal Information' and a note: 'Fields marked with an asterisk (*) are required. Please provide the following information.' The form fields include: First Name* (OSSE), Middle Name (empty), Last Name* (Test), Suffix (Select One dropdown), Country* (United States dropdown), Address 1* (123 Main St), Address 2 (e.g. Apt. 1), City/Town* (Washington), State* (District Of Columbia dropdown), Zip Code* (20001), Resided Since* (1 - January dropdown, 2016 dropdown), a section for government ID with checkboxes for U.S. SSN* (checked, 111-11-1111), Canadian SIN (empty, e.g. 111-234-567), and Other Country ID (empty, Select Country dropdown, Enter ID text), Date of Birth* (1 - January dropdown, 1 dropdown, 1951 dropdown), Phone* (United States +1 dropdown, 999-999-9999), a Mobile dropdown, and Email* (Osetest@gmail.com). A 'Save & Continue →' button is at the bottom right.

Step 11: Other Names

- If there are any other names you are known by or have used, including a maiden name, select **Yes**. Then click **+ Add Other Name**.
- If you do not have other names, select **No**. Then click **Save & Continue** →.

Sections

✓ Personal Information

Other Names

○ Other Addresses

○ Disclosure

○ States Disclosures

○ Authorization

○ Criminal Background Check Affirmation Form

Attach Documents

Review Summary

Submit Forms

Confirmation

Other Names

Fields marked with an asterisk (*) are required.

Are there any other names you are known by or have used (including maiden name, if applicable)? *

☒ Yes ☐ No

Please list any other names by which you are or have been known. Include maiden names where applicable.

Other Names

+ Add Other Name

There are currently no names listed.

← Back

Save & Continue →

Step 12: Other Addresses

- If you have any other addresses, select **Yes**. Then click **+ Add Other Address**.
- If you do not have other addresses, select **No**. Then click **Save & Continue** →.

Sections

☒ Personal Information

☒ Other Names

☐ Other Addresses

☐ Disclosure

☐ States Disclosures

☐ Authorization

☐ Criminal Background Check Affirmation Form

Attach Documents

Review Summary

Submit Forms

Confirmation

Other Addresses

Fields marked with an asterisk (*) are required.

Do you have other addresses you would like to add?*

☒ Yes ☐ No

Other Addresses

+ Add Other Address

There have been no other addresses added.

Other Address 1

ⓘ

This is your current address.

You are not able to delete it. If you need to edit it, please return to the [Personal Information](#) section.

Date

Jan, 2016 - Current

Country

United States

Address 1

123 Main St

City / Town

Washington

State

District Of Columbia

Zip Code

20001

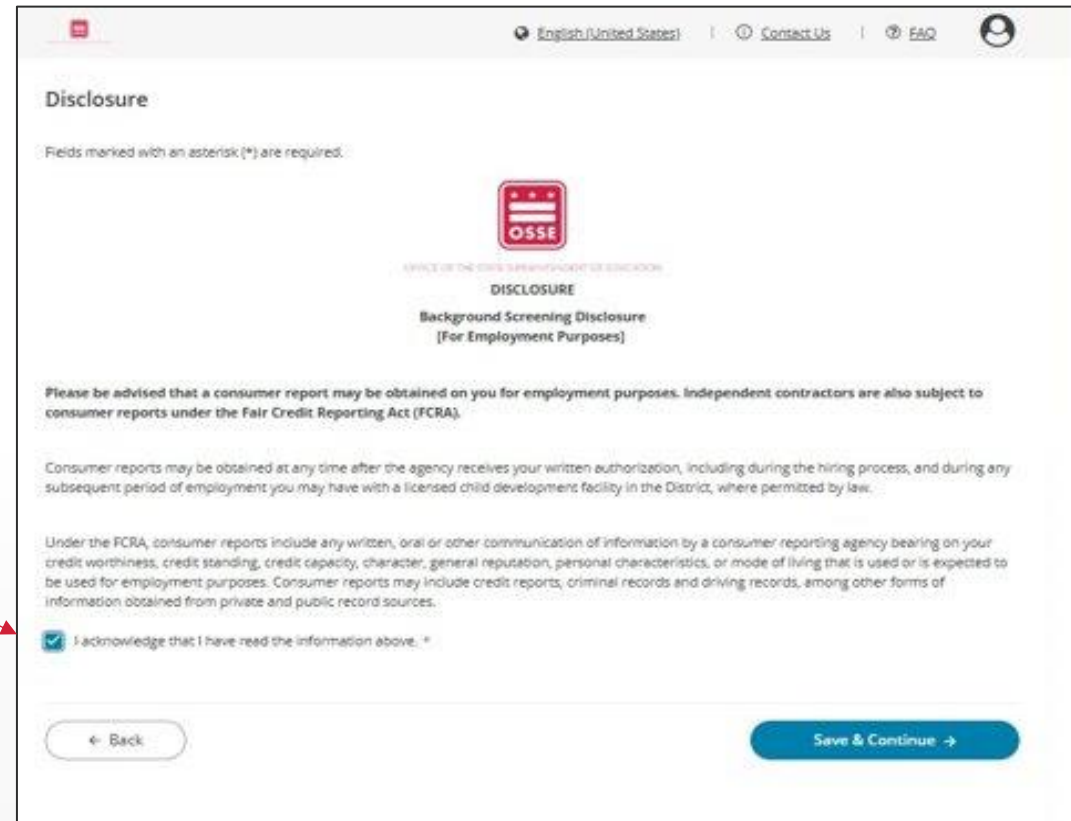
← Back

Save & Continue →

Step 13: Read the Background Screening Disclosure Form

- Read the form.
- Select **I acknowledge that I have read the information above.**
- Select **Save & Continue →**.

Click here

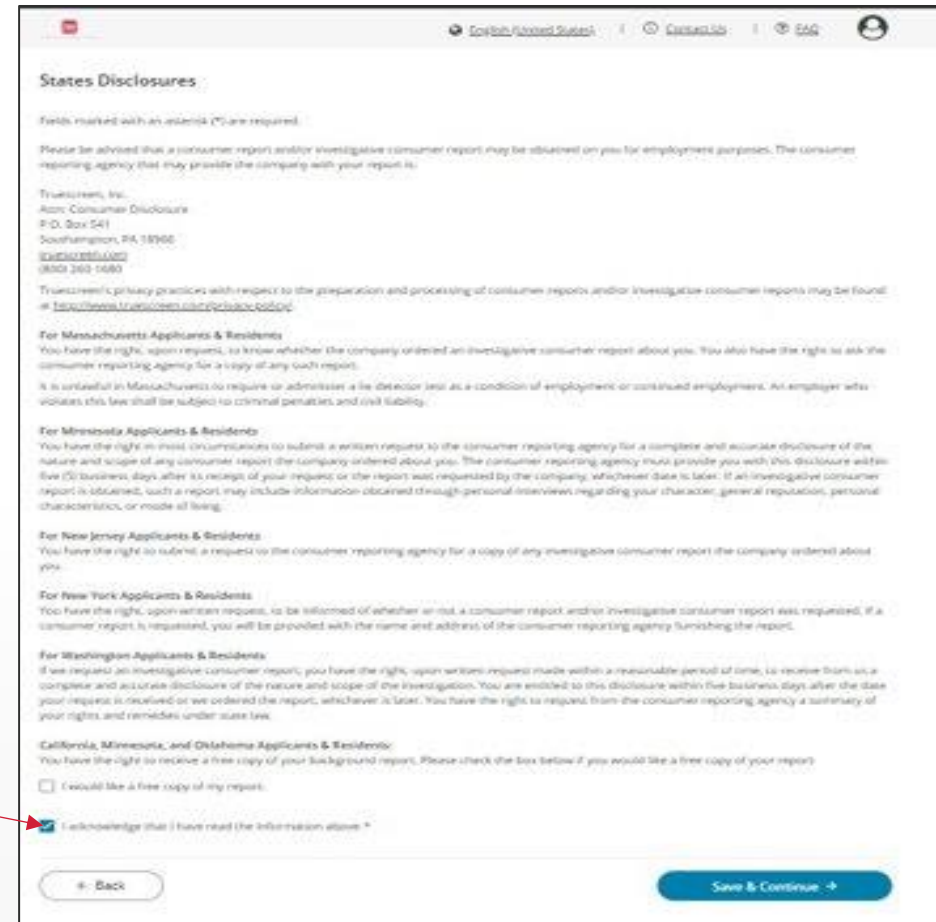


The screenshot shows a web form titled "Disclosure" from the Office of the State Superintendent of Education (OSSE). The form includes a header with the OSSE logo and navigation links for "English (United States)", "Contact Us", and "FAQ". Below the title, a note states "Fields marked with an asterisk (*) are required." The main heading is "DISCLOSURE Background Screening Disclosure [For Employment Purposes]". The form contains several paragraphs of text regarding consumer reports and the Fair Credit Reporting Act (FCRA). At the bottom, there is a checkbox labeled "I acknowledge that I have read the information above. *" which is checked. Below the checkbox are two buttons: "Back" and "Save & Continue →".

Step 14: Read the States Disclosures

- Read the disclosures.
- Select **I acknowledge that I have read the information above.**
- Click **Save & Continue** →.

Click here



The screenshot shows a web form titled "States Disclosures" with a light blue header. The form contains several sections of text regarding consumer reporting rights. At the bottom, there is a checkbox labeled "I acknowledge that I have read the information above." which is highlighted by a red arrow from a "Click here" text box. Below the checkbox are two buttons: "Back" and "Save & Continue →".

States Disclosures

Fields marked with an asterisk (*) are required.

Please be advised that a consumer report and/or investigative consumer report may be obtained on you for employment purposes. The consumer reporting agency that may provide the company with your report is:

TruScreen, Inc.
Attn: Consumer Disclosure
P.O. Box 541
Southampton, PA 18966
info@trucreen.com
(800) 360-1680

TruScreen's privacy practices with respect to the preparation and processing of consumer reports and/or investigative consumer reports may be found at <http://www.trucreen.com/privacy-policy>.

For Massachusetts Applicants & Residents
You have the right, upon request, to know whether the company ordered an investigative consumer report about you. You also have the right to ask the consumer reporting agency for a copy of any such report.
It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

For Minnesota Applicants & Residents
You have the right to request, in writing, a complete and accurate disclosure of the nature and scope of any consumer report the company ordered about you. The consumer reporting agency must provide you with this disclosure within five (5) business days after its receipt of your request or the report was requested by the company, whichever date is later. If an investigative consumer report is obtained, such a report may include information obtained through personal interviews regarding your character, general reputation, personal characteristics, or mode of living.

For New Jersey Applicants & Residents
You have the right to submit a request to the consumer reporting agency for a copy of any investigative consumer report the company ordered about you.

For New York Applicants & Residents
You have the right, upon written request, to be informed of whether or not a consumer report and/or investigative consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report.

For Washington Applicants & Residents
If we request an investigative consumer report, you have the right, upon written request made within a reasonable period of time, to receive from us a complete and accurate disclosure of the nature and scope of the investigation. You are entitled to this disclosure within five business days after the date your request is received or we ordered the report, whichever is later. You have the right to request from the consumer reporting agency a summary of your rights and remedies under state law.

California, Minnesota, and Oklahoma Applicants & Residents:
You have the right to receive a free copy of your background report. Please check the box below if you would like a free copy of your report.

☐ I would like a free copy of my report.

☒ I acknowledge that I have read the information above.*

Back Save & Continue →

Step 15: Sign the Background Screening Authorization Form

- Select **I will provide a mouse or touchpad signature (preferred method if possible)**.
- Draw your signature in the box using your mouse or touchpad. Click **Apply** signature.
- Select **I agree**.
- Click **Save & Continue** →.

The screenshot shows the 'Authorization' section of a 'BACKGROUND SCREENING AUTHORIZATION FORM [FOR EMPLOYMENT PURPOSES]'. It includes a signature method selection area with two radio buttons, a large signature box with a dashed border, and an 'I agree' checkbox. Callout boxes with arrows point to the following elements:

- Click here**: Points to the first radio button option, 'I will provide a mouse or touchpad signature (preferred method if possible)'.
- Sign here**: Points to the signature box.
- Click here**: Points to the 'I agree' checkbox.
- Click here**: Points to the 'Save & Continue' button at the bottom right.

Other visible text on the form includes: 'Fields marked with an asterisk (*) are required.', 'Please be advised that we may also obtain an investigative consumer report...', 'By signing below, I hereby authorize the company to obtain a consumer report and/or an investigative consumer report on me...', 'Please choose a signature method.', 'Note: Selecting a signature method will display additional required fields.', 'Draw your signature in the area below. Please hold down the left select button on your mouse or touchpad as you drag your mouse or finger to draw your signature.', 'Date: July 29, 2026', and 'Full Name: [input field] agree.*'.

Step 16: Complete Criminal Background Check Affirmation Form

- Review form.

Sections

✓ Personal Information

✓ Other Names

✓ Other Addresses

✓ Disclosure

✓ States Disclosures

✓ Authorization

☐ Criminal Background Check Affirmation Form

Attach Documents

Review Summary

Submit Forms

Confirmation

Criminal Background Check Affirmation Form

Fields marked with an asterisk (*) are required.


OFFICE OF THE STATE SUPERINTENDENT OF EDUCATION
Criminal Background Check Affirmation Form

Criminal background checks are required pursuant to the Child Care and Development Block Grant (CCDBG) Act of 1990, the District's Child and Youth, Safety and Health Omnibus Amendment Act (CYSHA) and the District of Columbia's Municipal Regulations (5A DCMR 133). The criminal background check for child care staff includes a Federal Bureau of Investigation (FBI) criminal history record check, National Sex Offender Registry (NSOR) search, DC Child Protection Register (CPR) check, and searches of criminal, sex offender, and child abuse/neglect registries in every state of residence within the previous five years. The Office of the State Superintendent of Education (OSSE) will issue a suitability determination based on these results.

Child care staff and volunteers working at a child development facilities licensed by OSSE with potential unsupervised access to children are required to undergo a mandatory criminal background check. Applicants for employment at a child development facility licensed by OSSE are also required to undergo a criminal background check.

Any individual who intentionally misrepresents, misinforms, or provides incomplete or misleading information on this form is subject to administrative action, including denial or termination of employment or volunteer service.

Disqualifying Offenses

- Murder, attempted murder, manslaughter, or arson;
- Assault, assault with a dangerous weapon, mayhem, malicious disfigurement, or threats of bodily harm;
- Kidnapping, robbery, or burglary;
- Sexual offenses, including sexual abuse, rape, child sexual exploitation, molestation, or child pornography;
- Child abuse, child neglect, or cruelty to children;
- Drug-related felonies occurring within the last five years;
- Any other felony involving violence, physical assault, or battery;
- Any offense requiring disqualification under federal CCDBG or District law.

Step 16 (cont.): Complete Criminal Background Check Affirmation Form

- Answer questions.
- Select **I will provide a mouse or touchpad signature (preferred method if possible).**
- Draw your signature in the box using your mouse or touchpad. Click **Apply signature**.
- Select **I agree**.
- Click **Save & Continue** →.

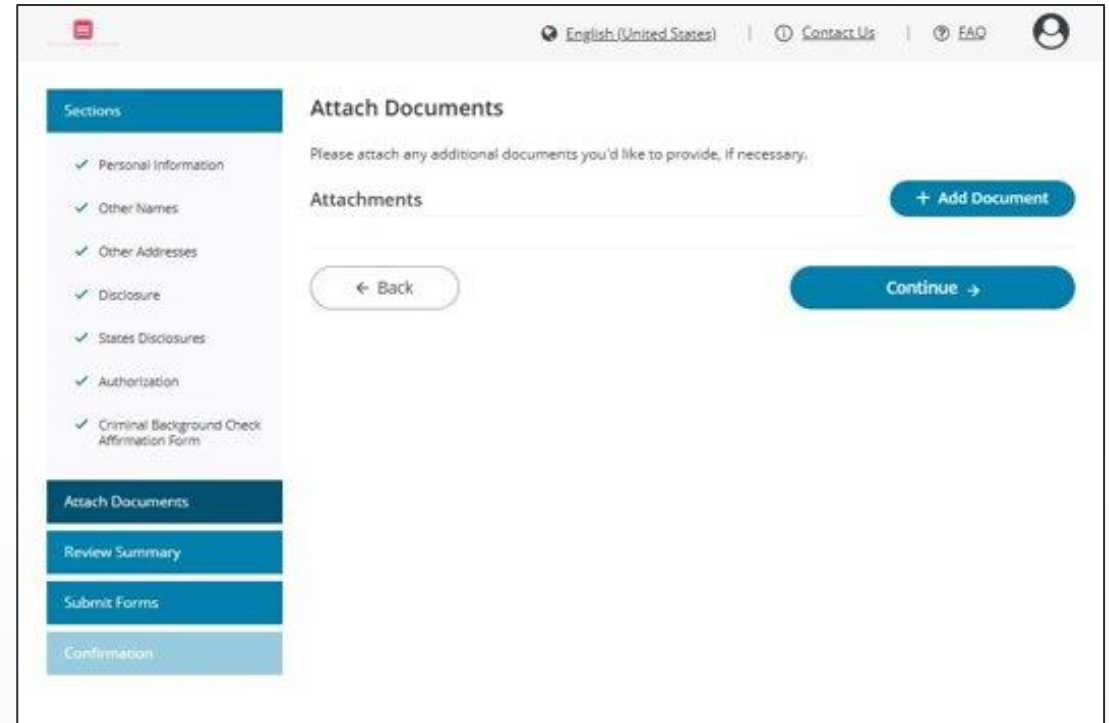
The screenshot shows the 'Criminal Background Check Affirmation Form'. It contains several sections with radio button options and a signature area. Callouts with arrows point to specific elements:

- Provide answers**: Points to three sections of the form, each with a radio button for 'I have' and 'I have not':
 - Section 1: Plead guilty to any of the above listed offenses or their equivalent, either in the District of Columbia, or in any state or territory. *
 - Section 2: Been on probation before judgment or placement upon a set docket of a case involving any of the felony offenses listed above. *
 - Section 3: Been found not guilty by reason of insanity of any of the above listed offenses or their equivalent, either in the District of Columbia, or in any state or territory. *
- Click here**: Points to the radio button for 'I will provide a mouse or touchpad signature (preferred method if possible)' under the heading 'Please choose a signature method. *'. A note below states: 'Note: Selecting a signature method will display additional required fields.'
- Click here**: Points to the 'Apply signature' button at the bottom right of the signature area.
- Click here**: Points to the 'Save & Continue' button at the bottom right of the form.

Other visible elements include a date field (July 29, 2026), a checkbox for 'I agree', and a 'Back' button.

Step 17: Attach Documents

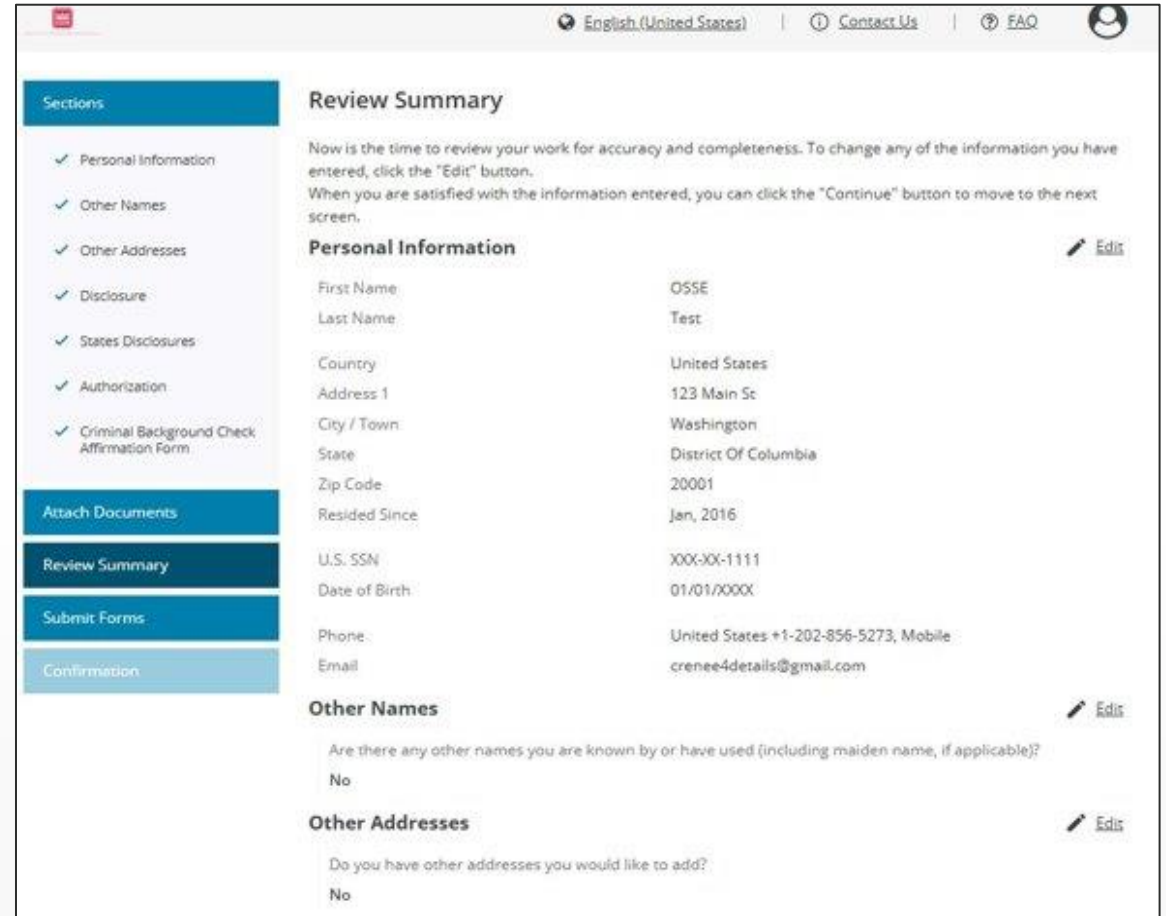
- Additional documents are not required.
- Click **Continue** →.



The screenshot shows a web application interface for the 'Attach Documents' step. On the left, a sidebar lists sections: 'Personal Information', 'Other Names', 'Other Addresses', 'Disclosure', 'States Disclosures', 'Authorization', and 'Criminal Background Check Affirmation Form', all marked with checkmarks. Below these are buttons for 'Attach Documents', 'Review Summary', 'Submit Forms', and 'Confirmation'. The main content area is titled 'Attach Documents' and includes the instruction 'Please attach any additional documents you'd like to provide, if necessary.' Below this is an 'Attachments' section with a '+ Add Document' button. At the bottom of the main area are 'Back' and 'Continue' buttons. The top of the page features a header with 'English (United States)', 'Contact Us', 'FAQ', and a user profile icon.

Step 18: Review Summary

- Review your information.
- If you need to make changes to the information, click **Edit**.



The screenshot shows the 'Review Summary' page of the OSSE application. The page has a header with 'English (United States)', 'Contact Us', 'FAQ', and a user profile icon. A left sidebar contains a 'Sections' menu with checkboxes for 'Personal Information', 'Other Names', 'Other Addresses', 'Disclosure', 'States Disclosures', 'Authorization', and 'Criminal Background Check Affirmation Form'. Below this are buttons for 'Attach Documents', 'Review Summary' (highlighted), 'Submit Forms', and 'Confirmation'. The main content area is titled 'Review Summary' and includes instructions: 'Now is the time to review your work for accuracy and completeness. To change any of the information you have entered, click the "Edit" button. When you are satisfied with the information entered, you can click the "Continue" button to move to the next screen.' The 'Personal Information' section lists fields: First Name (OSSE), Last Name (Test), Country (United States), Address 1 (123 Main St), City / Town (Washington), State (District Of Columbia), Zip Code (20001), Resided Since (Jan, 2016), U.S. SSN (XXX-XX-1111), Date of Birth (01/01/XXXX), Phone (United States +1-202-856-5273, Mobile), and Email (crenee4details@gmail.com). Each section has an 'Edit' button. The 'Other Names' section asks 'Are there any other names you are known by or have used (including maiden name, if applicable)?' with a 'No' response. The 'Other Addresses' section asks 'Do you have other addresses you would like to add?' with a 'No' response.

Personal Information	
First Name	OSSE
Last Name	Test
Country	United States
Address 1	123 Main St
City / Town	Washington
State	District Of Columbia
Zip Code	20001
Resided Since	Jan, 2016
U.S. SSN	XXX-XX-1111
Date of Birth	01/01/XXXX
Phone	United States +1-202-856-5273, Mobile
Email	crenee4details@gmail.com

Other Names

Are there any other names you are known by or have used (including maiden name, if applicable)?

No

Other Addresses

Do you have other addresses you would like to add?

No

Step 18 (cont.): Review Summary

- If the information is correct, click **Continue** →.

equivalent, either in the District of Columbia, or in any state or territory.

Pleaded nolo contendere to any of the above listed offenses or their equivalent, either in the District of Columbia, or in any state or territory. I have not

Been on probation before judgment or placement upon a stet docket of a case involving any of the felony offenses listed above. I have not

Been found not guilty by reason of insanity of any of the above listed offenses or their equivalent, either in the District of Columbia, or in any state or territory. I have not

I hereby affirm my responsive declaration to each statement on this Affirmation Form and I authorize the Office of the State Superintendent of Education (OSSE) to conduct a criminal background check. I understand that I have the right to obtain a copy of any report from the criminal background check and to challenge the accuracy and completeness of any such report. I also acknowledge that OSSE may decide to deny or terminate its Provider Agreement with me to provide subsidized child care services based on the results of the criminal background check and that I may appeal that decision to the DC Commission on Human Rights within 30 days of OSSE's written decision.

Date Jul 29, 2026

Full Name Osse Test

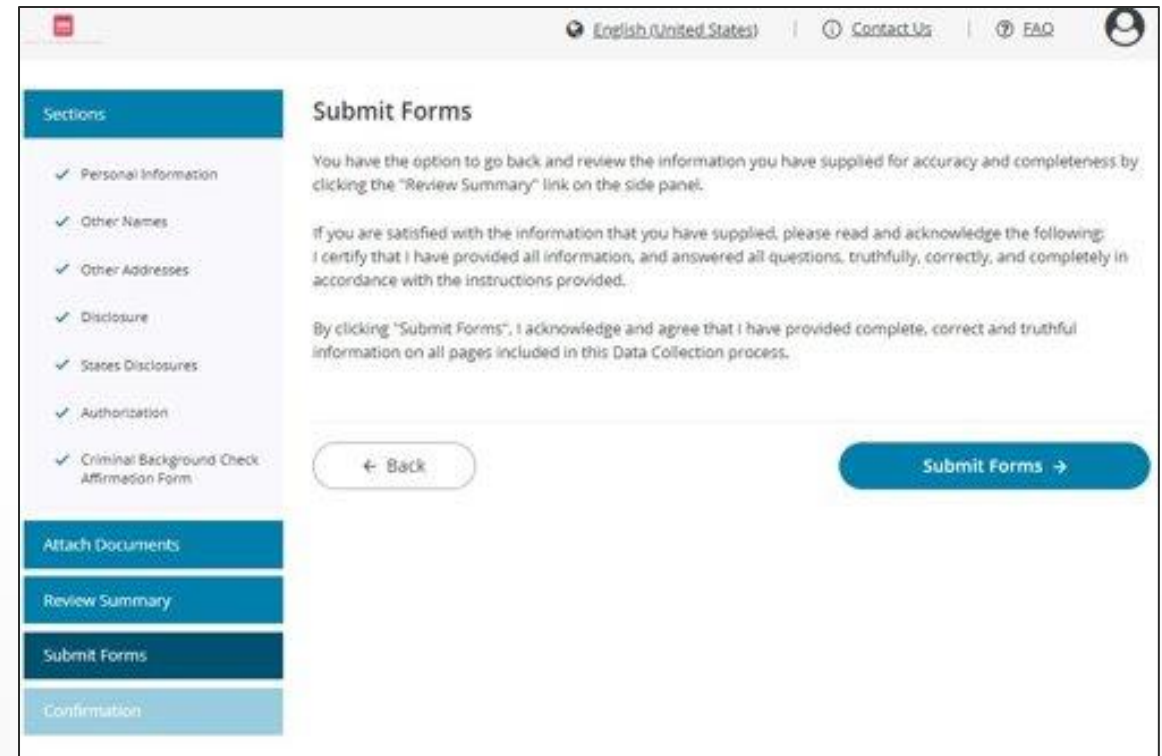
Signature 

← Back Continue →

Click here

Step 19: Submit Forms

- If you reach the Submit Forms page and need to edit your application, click **← Back** or select the section you want to edit on the left side under Sections.
- When you're ready to submit your application, click **Submit Forms →**.
- Note: You cannot edit the application after you click **Submit Forms →**.



The screenshot shows a web application interface for submitting forms. At the top, there is a navigation bar with links for 'English (United States)', 'Contact Us', and 'FAQ', along with a user profile icon. The main content area is divided into two sections. On the left, under the heading 'Sections', there is a list of application sections, each with a checkmark indicating completion: 'Personal Information', 'Other Names', 'Other Addresses', 'Disclosure', 'States Disclosures', 'Authorization', and 'Criminal Background Check Affirmation Form'. Below this list are four buttons: 'Attach Documents', 'Review Summary', 'Submit Forms' (which is highlighted in a darker blue), and 'Confirmation'. On the right, the 'Submit Forms' section contains a paragraph explaining the option to go back and review information, followed by a certification statement. At the bottom of this section, there are two buttons: '← Back' and 'Submit Forms →' (highlighted in a darker blue).

***Required for all child care staff**



Section 2

*Completing an FBI fingerprint check
and state fingerprint checks for DC
and Virginia*

Step 1: Make an appointment for FBI background check

- Go to go.nemoqappointment.com/Booking/Booking/Index/dc876re9gh
- Under *New appointment*, in the *Service* field, select **Fingerprints – Employment**.
- Click **Make an appointment**.

DC Metropolitan Police Department

Welcome to Metropolitan Police Department's Firearms Registration and Record Division appointment system. You can schedule appointments for Fingerprinting, Concealed Carry Weapon, Home Protection/ Registration, Police Reports, Criminal History, and Data Conversion.

For assistance with issues with the appointment portal contact the Appointment Help Desk (202)727-4275.

Further information and answers to your questions can be located on the Metropolitan Police Homepage at the following link: <https://mpdc.dc.gov/firearms>

To make a new appointment you must acknowledge that your personal data will be temporarily stored.

New appointment

Service: Please select...

Make an appointment

Edit/Cancel appointment

Confirmation number:

Email/Phone number:

Edit appointment

Click here and
select
**Fingerprints –
Employment**

Click here

Step 2: Agree to terms and conditions

- Read the agreement.
- Click **I agree to the terms and conditions**.
- Click **Next**.
- Note: The \$35 background check fee is paid by OSSE. Your employer will provide you with a **billing code** that you must use at your appointment.

Click here

Start (restart) Agreement Select time Personal data Contact information Summary

Approval of terms and conditions

Please be courteous and only maintain one appointment, if you have 2 appointments, please cancel one.

The fee for all fingerprints is \$35 per person.

unless you are in one of the below specific categories. If you need to be Ink fingerprinted for nursing/medical license, mental health, bar exams, or a government clearance etc., You must be a resident of the District of Columbia. You must also provide your own fingerprint card(s) The Cost to ink print on each card is, \$5 per card. The required proof of residency is a DC License / ID, lease agreement beyond 1 yr and or Military ID.

Before making a new appointment, you must acknowledge that your personal data will be temporarily stored. If you fail to do so, you will not be able to make an appointment. Then select number of people for the appointment.

Agreement

Terms and conditions for storage of personal data:

Terms and conditions for storage of personal data! To be able to create a new appointment in NQ appointment it is required that your personal data will be stored temporarily for all people that is part of this appointment. Deletion of personal data will take place automatically the day after appointment date, from ordinary as well as back-up storages. By accepting this agreement I accept the following: 1. Personal data of all people part of this appointment is stored 2. Deletion of personal data according to (1) above, will take place automatically the day after appointment date.

☐ I agree to the terms and conditions:

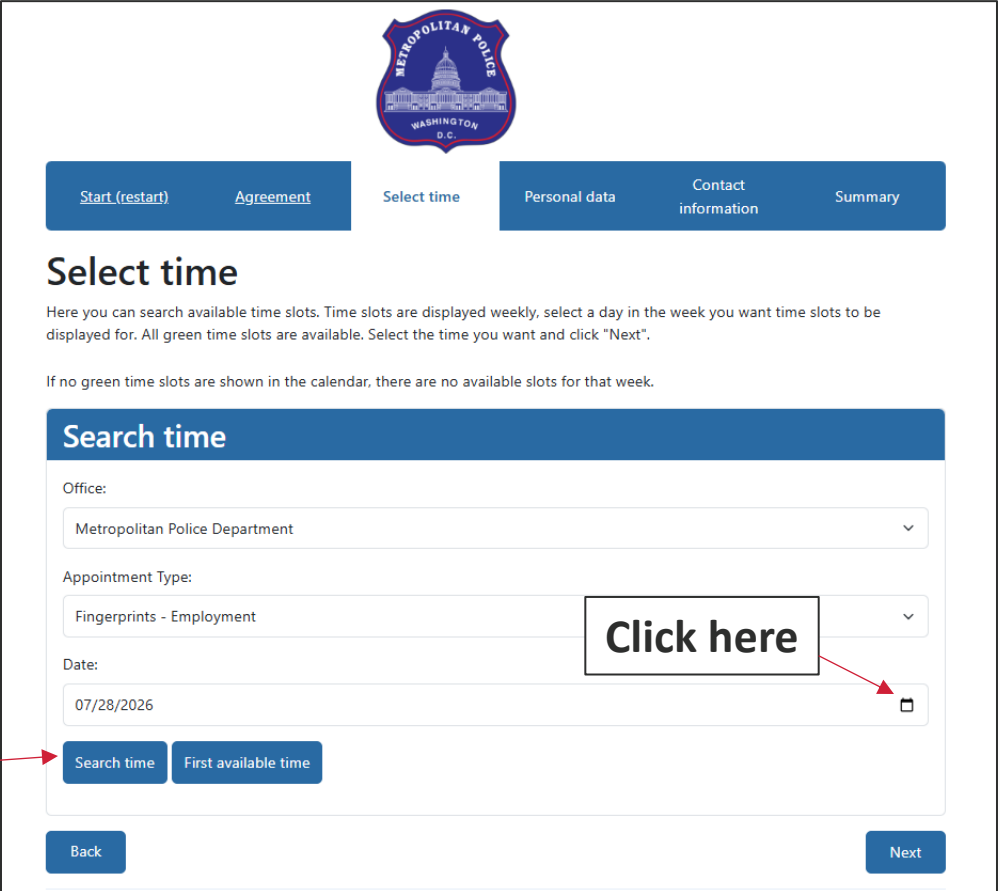
Back Next

Click here

Step 3: Select time and date

- Click the **calendar icon**.
- A calendar will appear. Select the date when you would like to schedule your appointment.
- Click **Search time**.
- Note: MPD background checks are conducted at 441 Fourth St. NW, Suite 550 South, Washington, DC 20001.

Click here



The screenshot shows the MPD appointment scheduling interface. At the top is the MPD logo. Below it is a navigation bar with buttons: [Start \(restart\)](#), [Agreement](#), [Select time](#) (highlighted), [Personal data](#), [Contact information](#), and [Summary](#). The main heading is **Select time**. Below this is a paragraph: "Here you can search available time slots. Time slots are displayed weekly, select a day in the week you want time slots to be displayed for. All green time slots are available. Select the time you want and click 'Next'." Below this is a note: "If no green time slots are shown in the calendar, there are no available slots for that week." The main form is titled **Search time** and contains three dropdown menus: **Office:** (Metropolitan Police Department), **Appointment Type:** (Fingerprints - Employment), and **Date:** (07/28/2026). A red arrow points from a "Click here" box to the date dropdown menu. Below the date field are two buttons: **Search time** and **First available time**. A red arrow points from another "Click here" box to the **Search time** button. At the bottom are **Back** and **Next** buttons.

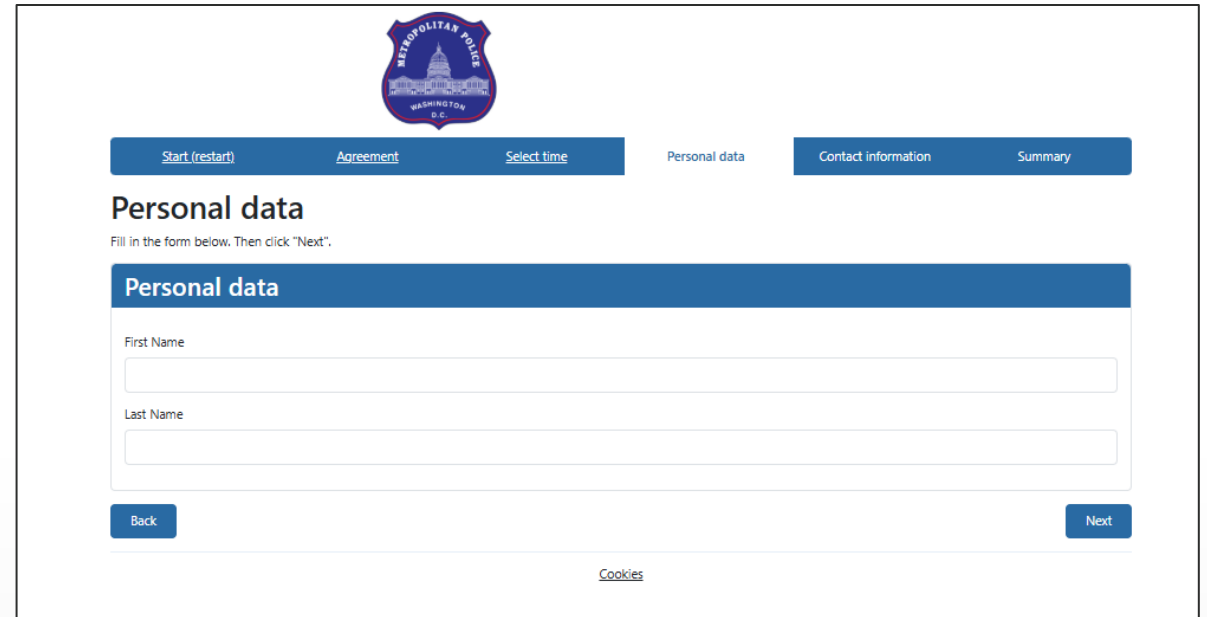
Step 3 (cont.): Select time and date

- Timeslots will appear for the selected date. Times that are green are available for booking.
- Select an appointment time on your preferred date and click **Next**.

Mon 27 Jul	Tue 28 Jul	Wed 29 Jul	Thu 30 Jul	Fri 31 Jul	Sat 1 Aug	Sun 2 Aug
	Booked	Booked	9:00 AM	9:00 AM		
	Booked	Booked	9:10 AM	9:10 AM		
	Booked	Booked	9:20 AM	9:20 AM		
	Booked	9:30 AM	9:30 AM	9:30 AM		
	Booked	9:40 AM	9:40 AM	9:40 AM		
	Booked	9:50 AM	9:50 AM	9:50 AM		
	Booked	Booked	10:00 AM	10:00 AM		
	10:10 AM	Booked	10:10 AM	10:10 AM		
	Booked	10:20 AM	10:20 AM	10:20 AM		
	Booked	10:30 AM	10:30 AM	10:30 AM		
	10:40 AM	10:40 AM	10:40 AM	10:40 AM		
	10:50 AM	10:50 AM	10:50 AM	10:50 AM		
	11:00 AM	11:00 AM	Booked	11:00 AM		
	11:10 AM	11:10 AM	11:10 AM	11:10 AM		
	11:20 AM	11:20 AM	11:20 AM	11:20 AM		
	Booked	11:30 AM	11:30 AM	11:30 AM		
	11:40 AM	11:40 AM	11:40 AM	11:40 AM		
	11:50 AM	11:50 AM	11:50 AM	11:50 AM		
	12:00 PM	Booked	12:00 PM	Booked		

Step 4: Personal Data

- Enter your First Name and Last Name
- Click **Next**.



The screenshot shows a web form for the Metropolitan Police, Washington D.C. At the top is the police department's logo. Below it is a navigation bar with links: [Start \(restart\)](#), [Agreement](#), [Select time](#), [Personal data](#) (which is highlighted), [Contact information](#), and [Summary](#). The main heading is "Personal data" with a sub-instruction: "Fill in the form below. Then click 'Next'". The form itself has a blue header "Personal data" and two input fields: "First Name" and "Last Name". At the bottom of the form are two buttons: "Back" and "Next". A [Cookies](#) link is located at the very bottom of the page.

Step 5: Complete Contact Information

- Under *Contact information*, insert your **Email address** and **Cell phone number**.
- Under *Confirmation type*, select **Email**.
- You will need to send proof of your email confirmation to your employer.
- Under *Reminder type*, select how you would like to be reminded about your appointment (**Email** or **SMS** [text message]).
- Under *Additional information*, insert the **name of the child development facility** where you work and **your staff type**.
- Click **Next**.

The screenshot shows a web form titled 'Contact information' with a progress bar at the top indicating the current step. The form includes instructions and input fields for contact details, confirmation type, reminder type, and additional information.

Contact information

You will need either the confirmation number or the phone number used to make the appointment to check in on the day of your appointment.

Enter your contact information. After you have confirmed the booking, a confirmation will be sent to the e-mail address and/or phone number entered here. Also select how long before your appointment you want a reminder to be sent.

By check marking the SMS confirmation and reminder option you are **opting in** to receive text messages on your phone about your appointment.

Contact information

E-mail address:

Cell phone number:

Confirmation type:
☒ Email
☐ SMS

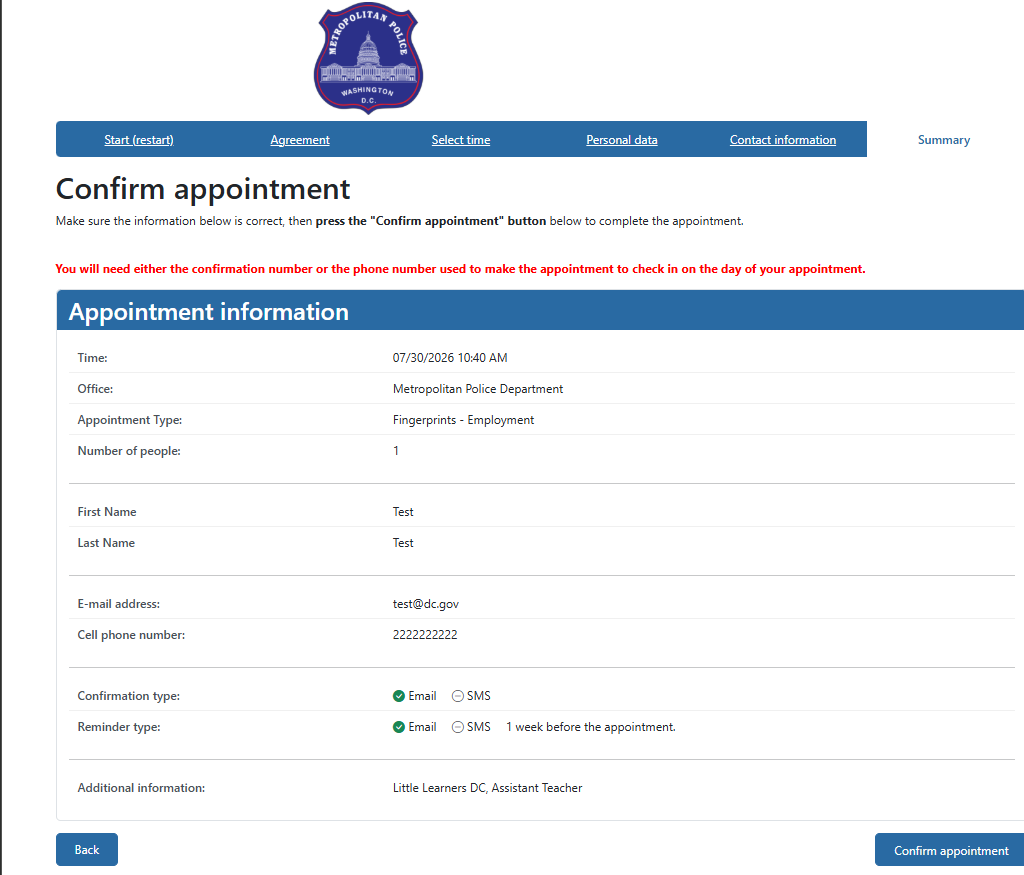
Reminder type:
☒ Email
☐ SMS
1 week before the appointment.

Additional information

Additional information:

Step 6: Confirm appointment

- Review the information.
- If the information is accurate, click **Confirm appointment**.
- You will receive a confirmation email from MPD. Forward your confirmation email to your employer. Your employer must upload the confirmation email to OSSE's licensing system.
- If you need to make changes, click **Back**.



The screenshot shows the 'Confirm appointment' page of the Metropolitan Police Department (MPD) website. At the top is the MPD logo. Below it is a navigation bar with links: [Start \(restart\)](#), [Agreement](#), [Select time](#), [Personal data](#), [Contact information](#), and [Summary](#). The main heading is 'Confirm appointment', followed by the instruction: 'Make sure the information below is correct, then press the "Confirm appointment" button below to complete the appointment.' A red warning message states: 'You will need either the confirmation number or the phone number used to make the appointment to check in on the day of your appointment.' The 'Appointment information' section contains a table with the following details:

Time:	07/30/2026 10:40 AM
Office:	Metropolitan Police Department
Appointment Type:	Fingerprints - Employment
Number of people:	1
First Name	Test
Last Name	Test
E-mail address:	test@dc.gov
Cell phone number:	2222222222
Confirmation type:	☒ Email ☐ SMS
Reminder type:	☒ Email ☐ SMS 1 week before the appointment.
Additional information:	Little Learners DC, Assistant Teacher

At the bottom of the form are two buttons: [Back](#) and [Confirm appointment](#).

If you need to edit or cancel your appointment

- To edit or cancel your appointment, go the [MPD appointment system](#).
- Under *Edit/Cancel appointment*, enter your confirmation number and the email/phone number.
- Click **Edit appointment**.

DC Metropolitan Police Department

Welcome to Metropolitan Police Department's Firearms Registration and Record Division appointment system. You can schedule a time for Fingerprinting, Concealed Carry Weapon, Home Protection/ Registration, Police Reports, Criminal History, and Data Conversion.

For assistance with issues with the appointment portal contact the Appointment Help Desk (202)727-4275.

Further informations and answers to your questions can be located on the Metropolitan Police Homepage at the following link: <https://mpdc.dc.gov/firearms>

To make a new appointment you must acknowledge that your personal data will be temporarily stored.

New appointment

Service:

Make an appointment

Edit/Cancel appointment

Confirmation number:

Email/Phone number:

Edit appointment

Click Edit
Appointment

Step 8: Complete appointment

- Be sure to make your appointment on time.
- Bring a non-expired government-issued ID.
- Your employer will provide you with a **billing code** that you **must** bring to your appointment.
- Upon arrival for fingerprint check and processing, provide the billing code to MPD.
- If you do not provide the billing code to MPD you will be responsible for the \$35 fingerprinting fee.
- Results from your fingerprint check, which includes the FBI check and DC and Virginia state checks (as applicable) will be sent directly to OSSE.



Section 3

Completing a fingerprint check for Maryland

Scheduling a background check (fingerprints) for Maryland

- Child care staff who currently reside in Maryland or have resided in Maryland within the past five years must complete a fingerprint check for that state.
- Background checks for Maryland are conducted at a Criminal Justice Information System (CJIS) Storefront location or an authorized private provider in Maryland.
- Child care staff are responsible for scheduling an appointment at a CJIS Storefront location or authorized private provider.
- Visit dpscs.maryland.gov/publicservs/fingerprint.shtml for guidance on how to complete the background check in Maryland.
- After you schedule your background check appointment for Maryland, you will receive a confirmation email from your selected background check provider. **You must share a copy of the confirmation with your employer.**
- After completing your background check, your results for Maryland will be sent directly to OSSE.

Completing the Livescan Pre-registration Application

- Before your appointment, complete the [Livescan Pre-registration Application](#).
- Complete all fields in the **Applicant Information** section.
- Do not complete the **Individual** section.
- In the **Agency** section:
 - Select **Private Party Petition**.
 - DO NOT select Child Care.
 - In the **Agency Authorization Number** and **ORI Number** fields insert the numbers provided to you by your employer.
 - In the **Position Applied** field insert your staff type (e.g., Teacher, Assistant Teacher, Associate Home Caregiver, etc.)
- You **must** bring a printed copy of your completed application to your appointment.

Complete all fields

Insert numbers provided by employer

Insert staff type

The form is titled "LIVESCAN PRE-REGISTRATION APPLICATION" and is from the "STATE OF MARYLAND DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES INFORMATION TECHNOLOGY AND COMMUNICATIONS DIVISION CRIMINAL JUSTICE INFORMATION SYSTEM - CENTRAL REPOSITORY (CJIS-CR)".

APPLICANT INFORMATION
Please type or print legibly.

Name: _____
 Date of Birth: _____ Social Security Number: _____ Gender: ☐ Male ☐ Female
 Height: _____ ft. _____ in. Weight: _____ lbs. Eye Color: _____ Hair Color: _____
 Race/Ethnicity: ☐ Black ☐ White ☐ Asian/Pacific Islander ☐ Native American ☐ Other
 Place of Birth: _____ Citizenship: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone Number: _____ Driver's License Number: _____ Email Address: _____

REASON FOR REQUEST
INDIVIDUAL
 Please select one of the following:
☐ Gold Seal/Adoption (Enter Authorization Number if applicable) _____
☐ Gold Seal/Letter/VISA
☐ Immigration/VISA
☐ Individual Challenge
☐ Individual Review
☐ Attorney/Client (Written Authorization Required)

Mailing Information:
 Name: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____

AGENCY
 Please select from the following (*ORI Required):
☐ Adult Dependent Care ☐ Government Employment* ☐ Private Party Petition**
☐ Child Care* ☐ Government Licensing or Certification* ☐ Public Housing
☐ Criminal Justice* ☐ Maryland State Police Licensing*

Agency Authorization Number: _____
 *ORI Number: _____
 **Position Applied: _____

ITCD-16 LIVE-SCAN PRE-REGISTRATION APPLICATION June 2019

Select Private Party Petition

What to bring to your background check appointment

- Printed copy of your completed [Livescan Pre-registration Application](#).
- Valid form of government-issued photo identification.
- Payment for associated fees.
- Note: Fees and accepted payment methods vary by fingerprint provider. Check with your selected provider for more information on fees and acceptable payment methods.

Where to direct questions

- Contact your employer if:
 - You need the Agency Authorization Number or ORI Number.
 - You are unsure of your staff type.
- Contact your selected background check provider if:
 - You have questions related to fees and payments methods.
 - You have questions related to your appointment.
- Contact CJIS Customer Services if:
 - You have general questions related to the background check process for Maryland.



Section 4

Completing a fingerprint check for a state other than DC, Maryland, or Virginia

Completing a background check in a state other than DC, Maryland, or Virginia

- Child care staff who have resided in a state other than DC, Maryland, or Virginia within the last five years must complete a fingerprint check for that state.
- Each state operates its own fingerprint check process. Child care staff should check with the state where they need to complete background check to learn more about their process and associated fees.
- Child care staff who participate in a state fingerprint check in a state(s) other than DC are responsible for sharing proof they've scheduled a fingerprinting appointment(s) with their employer. The employer will then submit the proof of the appointment(s) to OSSE.
- Child care staff who participate in a state fingerprint check(s) outside of DC or Maryland are responsible for sharing the results of their check with their employer. The employer should then submit the results to OSSE.
- **Reminder: The FBI fingerprint check conducted by MPD includes state fingerprint checks for DC and Virginia. Child care staff who currently reside in DC or Virginia or have resided in DC or Virginia within the past five years do not need to complete an additional fingerprint check for those states. The FBI fingerprint check conducted by MPD includes checks for DC and Virginia (see Section 2 for instructions for scheduling a fingerprint check with MPD).**

***Required for all child care staff**



Section 5

*Completing a child abuse and neglect
registry check for DC*

Step 1: Complete the Child and Family Services Agency's (CFSA's) Child Protection Registry Form

- Go to octo.quickbase.com/nav/app/btuystm5d/action/appoverview
- Scroll down and click **Create New Application.**

Click here

CFSA-CPR Public 2024

CFSA-CPR Public 2024 > Public Home Page

PLEASE NOTE: We recommend you use the Google Chrome browser (it works better than Edge, Firefox, Safari, etc.) to complete this application. It also is easier to view and complete on a computer than on a tablet or cellphone phone.

BEFORE YOU START
NOTE: this form can't be saved, you will need to complete it in one sitting:

- Have all your information ready before you begin, including a government-issued photo ID (e.g., driver license, passport).
- Review your application to make sure all information is correct, you can't change it after you click the submit button.
- Do not use autofill. If your browser has an autofill function to fill out forms, don't use it to complete this form.
- Before you upload your photo ID, save it in this format: firstname-lastname-year (e.g., John-Doe-ID-2022.jpg) with no periods, punctuation, special characters or spaces in the file name.
- When done, be sure to click the green "Save & close" button. If information is missing, a pop-up notice will state what needs to be fixed.

IMPORTANT: This application contains personally identifiable information (PII) and should only be submitted via secure methods. NEVER submit your application or photo ID by email.

WHO GETS THE RESULTS?
NOTE: The results are never provided directly to the applicant unless it's for an expungement/self check.

- By law, CFSA emails the results to the authorized requestor (e.g., direct employer, college/university, adoption agency or child welfare agency).
- Applicants must provide an email address for the direct employer/organization in order to receive results, NOT the applicant's personal email address.
- If the direct employer/organization has a partnership or contract with a DC Government agency the results may be shared with both the direct employer and the DC Government agency.

HOW ARE THE RESULTS SENT?

- The result letters are sent via encrypted email to the authorized requestor and/or channeler.
- Encrypted email messages will expire after 30 days. Be sure to open and download or print the result letters right away.

WHEN WILL THE RESULTS BE READY?

- New/Initial checks take up to 14 calendar days.
- Renewal checks take up to 30 calendar days.
- Expungement/Self checks take up to 21 calendar days.

WHAT IF THE RESULTS ARE LATE?
NOTE: VPN or server security settings may quarantine or block encrypted email messages from CFSA.

- Check your spam/junk folder and add dcgov.notification@zixmessagecenter.com to your safe senders list.
- If the results are not received by the usual deadline (14, 21 or 30 days), don't wait to contact the CPR office. Call or email and type "status query" in the subject line. Staff will respond within 24 hours or the next business day.
- If CFSA confirms that the results were sent but you did not receive them, you may need to contact your organization's IT department for assistance to allow receipt of encrypted email.

QUESTIONS OR ASSISTANCE
Contact the CPR Office from 8:30 AM-4:30 PM Monday through Friday:

- cfsa_cpr@dc.gov or call 202-727-8885 for status checks, expedite requests, or copies of result letters.
- <https://cfsa.dc.gov/service/child-protection-register-cpr> for more information
- [Timesheet-Photo-IDs-2022.pdf](#)

Please scroll down and click the blue button to begin your CPR Application.

Click Button Below

Create New Application

Step 2: Reason for CPR Check

- Under *Type of Check*, select **Initial Check** if it is your first time completing a CPR in DC. Select **Renewal Check** if you have completed a CPR in DC previously.
- Under *Request Purpose*, select **Employment**.
- Under *Applicant Role*, select **Employee** if you are a child care staff. Select **Intern/Volunteer/Student** if you are a volunteer.

Reason for CPR Check

Get this information from the employer or requesting agency if unsure.

- Initial Check: I don't have a DC CPR clearance on file with this employer/requestor.
- Renewal Check: I have a DC CPR clearance on file with this employer/requestor that will expire or has expired.

Type of Check *

☐ Initial Check

☐ Renewal Check

- Employment: new or current employees, contractors, volunteers, and interns.
- Child Welfare: for adoption, foster care, kinship care, guardianship, custody or visitation.
- CFSA Grandparent & Close Relative Caregiver Program (GCP-CRCP) subsidy recipient.
- Self/Expungement Check: for applicants who have been investigated by CFSA and want to check their status on the Child Protection Register and expungement eligibility; may not be used for employment, child welfare or licensing purposes.

Request Purpose *

Search and select

Applicant Role *

First choose Request Purpose

Step 3: Employer/Requester Information

- Insert the name of the child development facility where you work/volunteer as well as their contact information, and address.

▼ Employer/Requester Information

-If you are an employee, contractor, or consultant, provide the name of the organization that you are applying to work for or already work for and pays your paycheck.
-If you are an intern/volunteer/student/fellow, provide the name of the college, university or organization that runs the program you are in.
-If you are seeking a professional license or certification, provide the name of the board or organization that will approve your license or certification.

📘 Employer Organization/Requestor Agency Name *

📘 Employer/Requestor Contact Person *

Employer/Requestor Email *

Confirm Employer/Requestor Email *

Employer/Requestor Phone Number *

ext.

Employer/Requestor Address

Search for an address

Street 1

Street 2

City

State/Region

Postal Code

Select a Country...

▼

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Step 4: Third Party/Channeler Information

- Under *Does a Third Party Need the Results?* select **Yes**.
- Under *Third Party/Channeler Contact Person* insert **Carolyn Taylor**.
- Under *Contact Person Phone Number* insert **202-445-3871**.
- Under *Channeler/Third Party Organization* insert **OSSE**.
- Under *Contact Person Email* insert OSSE.ChildCareBackgroundCheck@dc.gov.

✓ Third Party/Channeler Information

In some cases, the results will need to go to the employer and a third party. For example, the employer has a company (a channeler) that is managing the clearance process for them, the employer is using a staffing agency to do the hiring, the employer has a contract with a government agency, or the employer is required to share the results with a licensing body (e.g., DC licensed childcare providers share results with OSSE). If you were instructed to provide contact information for a third party, please provide it in this section.

Does a Third Party Need the Results?	Third Party/Channeler Contact Person	Contact Person Phone Number
v		ext.
Channeler/Third Party Organization	Contact Person Email	

Step 5: Applicant Information

- Insert your information. Be sure to complete all required fields.
 - First Name
 - Middle Name (if applicable)
 - Last Name
 - Date of Birth
 - Sex
 - Social Security Number (if applicable)
 - Email
 - Phone Number
 - Phone Type

▼ Applicant Information

Enter your full legal name as it appears on your government-issued photo ID.

📘 First Name *

📘 Middle Name: If there is no middle name, Type 'N/A'. *

📘 Last Name *

📘 Date of Birth (DOB) *

mm-dd-yyyy 📅

Sex *

Have a Social Security Number? *

📘 Social Security Number (SSN) - Do not include dashes

You must provide an email to receive a confirmation that your application was received.

Applicant Email *

Confirm Applicant Email *

📘 Applicant Phone Number *

Applicant Phone Type *

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Step 6: Alias Name (Other Names)

- If you currently or previously used another name(s), complete this section.

▼ Alias Name (Other Names Used)

Please type other names used such as maiden name, previous married name, legal name change, nicknames, alias, etc.

First Name

Middle Name

Last Name

Nickname

☐ Add another alias

Step 7: Applicant Address History

- Select your District of Columbia Residency Status.
- Enter information about your current address.
- If you resided at another address(es) over the past five years, select **Add another address** and complete all fields. Repeat for any additional addresses as needed.
- Once you've entered all your addresses, select **I certify that I have provided a full five (5) years of address history.**

Click here

▼ Applicant Address History

- List all addresses, and the start and end dates, to the best of your ability. To help find previous addresses, check the credit report bureaus (Equifax, Experian, TransUnion).

- Include your current address first.

- Include all prior addresses for the last five (5) years.

- If you were homeless, hospitalized, incarcerated, or otherwise had no stable address, list the start and end dates and you may write "no permanent address" in the street address field.

Start typing the address in the first box that says "Search for an address" and address options will appear that you can choose from.

District of Columbia Residency Status *

☐ I currently live in the District of Columbia

☐ I do not currently live in the District of Columbia

☐ I have never lived in the District of Columbia

Start Date of current address *

mm-dd-yyyy

Search for an address

Street 1

Street 2

City

State/Region

Postal Code

Select a Country...

▼

☐ Add another address

☐ I certify that I have provided a full five (5) years of address history. *

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Step 8: Application Children and Household Members

- Insert information for all children or household members.
- Select **Add another person** if you have multiple children and/or household members.

▼ Applicant Children & Household Members

- Do not list yourself below

- Household Members include spouse/partner, relatives, roommates, and tenants.

- Children includes biological, adopted, foster, step, and adult children, living at home or not.

First Name	Middle Name	Last Name	Date of Birth	Relationship to Applicant	
			mm-dd-yyyy 📅	Relationship to Applicant ▼	☐ Add another person

Step 9: Government Issued Photo ID

- Under *Government-issued Photo ID Front*, click **Choose File**.
- Upload a readable copy of the front of your government-issued photo ID (e.g., driver's license, passport, military ID).
- The ID must include your legal name and date of birth.
- Select **My Photo ID does NOT have the date of birth on the front** if your ID does not have your date of birth on the front. Under *Photo ID-Back (only needed if DOB is on the back)* click **Choose File** and upload a readable copy of the back of your ID.

✓ Government Issued Photo ID

- Applications won't be processed if photo identification is not provided.

- A readable copy of a government-issued photo ID (e.g., driver's license, passport, military ID, USCIS ID) must be uploaded.

- Copy must include the applicant's legal name and date of birth in order to verify the applicant's identity.

- If the name and date of birth are on the front of the ID, a copy of the back is not needed.

Government-issued Photo ID-front *

☐ My Photo ID does NOT have the date of birth on the front.

Choose File

No file chosen

Step 10: Applicant Consent

- Read the acknowledgement.
- Select **I Consent**.
- Click **Submit**.

▼ Applicant Consent

I hereby confirm that I have provided complete and accurate information. I understand that if I knowingly provide incomplete or false information, I may be subject to fines. I consent to and authorize the D.C. Child and Family Services Agency to provide information about me that may be contained in the Child Protection Register ("CPR") to the requestor(s) listed above, and agencies required by law to verify my employment suitability, program eligibility, or make legal determinations about me.

☐ I Consent *

Submit

Click here

Click here

More information and where to get support

- CFSA will send the results of your CPR check directly to OSSE. If you receive the result instead, you are responsible for sharing the result with your employer.
- For more information on the CPR check application visit: cfsa.dc.gov/service/child-protection-register-cpr#gsc.tab=0
- For questions, contact CFSA at cfsa.cpr@dc.gov or (202) 727-8885.



Section 6

Completing a child abuse and neglect registry check for Maryland

Completing a child abuse and neglect registry check for Maryland

- Child care staff who currently reside in Maryland or have resided in Maryland over the past five years must complete a child abuse and neglect registry check for that state.
- The [Maryland Department of Human Services](#) is responsible for child abuse and neglect registry checks for Maryland, which are referred to as Adam Walsh Checks.
- Please note, child care staff are responsible for paying any fees associated with the Adam Walsh Check.

How to complete an Adam Walsh Check

- There are two ways to complete an Adam Walsh Check in Maryland:
 - 1.) Use the [MyMDBenefits Portal](#). Instructions for using the portal are [available here](#).
 - 2.) Complete the [CPS Background Clearance Packet](#) and submit it via mail to:
Maryland Department of Human Services, Social Services Administration
CPS Background Clearance Unit
25 S. Charles St., 11th floor,
Baltimore, MD 21201
- For questions related to Adam Walsh Checks, email mdcps.clearances1@maryland.gov.

What to do after you receive your results

- You will receive your Adam Walsh Check results from the Maryland Department of Human Services.
- You must provide a copy of the results to your employer.
- Your employer must upload the results in OSSE's licensing system for review by OSSE.



Section 7

Completing a child abuse and neglect check for Virginia

Completing a child abuse and neglect registry check in Virginia

- Child care staff who currently reside in Virginia or have resided in Virginia over the past five years must complete a child abuse and neglect registry check for that state.
- The [Virginia Department of Social Services, Office of Background Investigations](#) is responsible for child abuse and neglect checks for Virginia.
- Please note, you are responsible for paying any fees associated with the child abuse and neglect check.

How to complete a child abuse and neglect check in Virginia

- Complete all required fields in the [Central Registry Release of Information Form \(Spanish\)](#).
- In the *Purpose of Search* field select **Adam Walsh Law**.
- In section labeled *MAIL SEARCH RESULTS TO: Agency, Individual or Authorized Agency Requesting Search* insert the name, address, phone number, and email address for the child development facility where you work/volunteer.
- For questions, email crs_operations@dss.virginia.gov.

Select Adam
Walsh Law

Insert your child
development
facility's
information

REQUIRED: Purpose of Search				☐ Adam Walsh Law	☐ Adoptive Parent	☐ Babysitter/Family Day Care
☐ CASA	☐ Children's Residential Facility	☐ Custody Evaluation	☐ Day Care Center	☐ Foster Parent		
☐ Institutional Employee	☐ Other Employment	☐ School Personnel	☐ Volunteer			
MAIL SEARCH RESULTS TO: Agency, Individual or Authorized Agent Requesting Search						
Name				Account Code/FIPS Code		
Address				Use only an E, U, B, or T CODE:		
City	State	Zip				
Contact Name	Tel.#	Ext				
REQUIRED: Contact E-Mail				Mandatory if agency code has been assigned		

How to complete a child abuse and neglect registry check in Virginia (cont.)

- A \$12 fee is required for each search. Payment must accompany search forms. Only money orders, company/business checks, or cashier checks will be accepted. All money orders, company/business checks, or cashier checks should be made payable to: Virginia Department of Social Services.
- Personal checks and cash will not be accepted. A \$50 fee will be charged by the Virginia Department of Social Services, Office of Background Investigations for all returned checks.
- Mail your completed, signed form and payment to:
Virginia Department of Social Services
Office of Background Investigations, 2nd Floor
5600 Cox Road
Glen Allen, VA 23060

What to do after you receive your results

- You will receive your child abuse and neglect registry results from the Virginia Department of Social Services.
- You must provide a copy of the results to your employer.
- Your employer must upload the results in OSSE's licensing system for review by OSSE.



Section 8

Completing a child abuse and neglect registry check for a state other than DC, Maryland, or Virginia

Completing a child abuse and neglect registry check in a state other than DC, Maryland, or Virginia

- Child care staff who have resided in a state other than DC, Maryland, or Virginia over the last five years must complete a child abuse and neglect registry check for that state.
- Each state operates its own child abuse and neglect registry check process. Child care staff should check with the state where they need to complete a check to learn more about their process and associated fees.
- Child care staff who participate in a child abuse and neglect registry check outside of DC, Maryland, or Virginia are responsible for sharing the results of their check with their employer. The employer should then submit the results to OSSE.



Questions?

Have questions or need support?

- For general questions related to the criminal background check process for child care staff, email OSSE.ChildCareLicensing@dc.gov.
- For questions related to ApplicationStation, contact customer service at 1-800-803-9042
- For questions related to the MPD appointment portal call MPD at (202) 727-4275.
- For questions related to Maryland fingerprinting call CJIS at (410) 764-4501.
- For questions related to a DC child abuse and neglect registry check, contact CFSA at cfsa.cpr@dc.gov or (202)-727-8885.
- For questions related to a Maryland child abuse and neglect registry check, email mdcps.clearances1@maryland.gov.
- For questions related to a Virginia child abuse and neglect registry check, email crs_operations@dss.virginia.gov.