

ADAM WALSH STATE CONTACTS FOR CHILD ABUSE REGISTRIES

This Contact List is maintained for the use and benefit of Foster Family Agencies & Foster Family Homes located in California only

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Alabama

Contact Information

State of Alabama DHR - Office of Child Protective Services
Attn: CA/N Central Registry
50 N. Ripley Street
Montgomery, AL 36130

Jon Perdue
jon.perdue@dhr.alabama.gov

Phone: (334) 242-9500
Fax: (334) 242-0939

Procedures/Forms

Form Required? Yes (*Link Below*)

[Alabama FORM](#) (Rev. 12/2009)

Methods of transmission: Original signature required, mail only.

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Alaska

Contact Information

Office of Children's Services
Attn: APSIN Unit
323 East 4th Avenue
Anchorage, AK 99051

Ken Saucier - (907) 269-4026
Fax: (907) 269-4098

ocsbackgroundcheck@alaska.gov

Procedures/Forms

Form Required? Yes (*Link Below*) – **also a valid photo ID/Driver's License**

[Alaska FORM](#) (Rev.08/2017)

Methods of transmission: E-mail, Fax, or US Mail

Fee: No

[Website](#)

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Arizona

Contact Information

Arizona Department of Child Safety
Attn: AWA
P.O. Box 6030, Site Code C0 10-19
Phoenix, AZ 85005-6030

Yvonne Santos
Phone: (602) 364-4255

Procedures/Forms

Form Required? Yes (*Link Below*)

[Arizona FORM](#)(Rev.08/2017)

Methods of transmission: E-mail

Fee: No

Website

DCSCentralRegistry@azdcs.gov

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Arkansas

Contact Information

Arkansas Child Maltreatment Central Registry
Attn: Background Screening
P. O. Box 1437
Slot S 566
Little Rock, AR 72203

Phone: (501) 682-0405 or
(501) 682-8760
Fax: (501) 682-0407

Procedures/Forms

Form Required? Yes (*Link Below*)

[Arkansas FORM](#) (Rev.05/02/2019)

Form MUST be notarized

Methods of transmission: Fax

Fee: No fee for state agencies, all others must pay **\$10** per form.

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California

Contact Information

California Department of Justice
Attn: Bureau of Criminal Information & Analysis CACI
P.O. Box 903387
Sacramento, CA 94203-3870

Phone: (916) 210-4092
Fax: (916) 227-3253

Email:
CACI-Inquiry@doj.ca.gov

Procedures/Forms

Form Required? Yes (*Link Below*) BCIA 4057 Child Abuse Central Index Inquiry Request for Out of State Foster Care & Adoption Agencies.

[CA FORM](#) (Rev.09/2009) [CA Instructions](#)

Methods of transmission: Original signature required, mail only.

Fee: **\$15**

Note: *Processing fees are reimbursable under Title IV-E administrative expenses.*

[CA DOJ Website](#)

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Colorado

Contact Information

CDHS, Division of Early Care and Learning
Attn: Trails Background Investigation Unit (BIU)
1575 Sherman Street, Ground Floor
Denver, CO 80203-1714

Phone: (303) 866-7436
Fax: (303) 866-5340

Shauna Sayer
(303) 866-4694

Procedures/Forms

Form Required? Yes (*Link Below*)

[Colorado FORM](#) (Rev. 12/20/2019)

(Applications will NOT be processed if not typed)

Methods of transmission: Original signature required, mail only.

Fee: **\$35** (paid by CDSS)

Website

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Connecticut

Contact Information

Department of Children and Families Careline
Attn: Background Check Unit
505 Hudson Street
Hartford, CT 06106

Phone: (800) 842-2288
Phone: (860) 560-7000
Fax: (860) 560-7071

Lisa Daymonde
Lisa.Daymonde@ct.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Connecticut FORM](#) (Rev. 10/2018)

Methods of transmission: US Mail, Fax, or E-mail to: DCF.BackgroundCheck@ct.gov

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Delaware

Contact Information

OCCL, Criminal History Unit
Attn: Concord Plaza, Hagley Building
3411 Silverside Road
Wilmington, DE 19810

Toll Free: (800) 292-9582
Phone: (302) 892-5800
Fax: (302) 633-5191

Beth Kramer
beth.kramer@delaware.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Delaware FORM](#) Child Protection Registry Request

Must be submitted within 90 days of signature date

Methods of transmission: Mail or Fax

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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District of Columbia

Contact Information

Child & Family Services Agency
Attn: Child Protection Register
200 I Street, SE 3rd Floor
Washington, DC 20003

Phone: (202) 671-7233
Fax: (202) 727-8040

cfsa@dc.gov

Procedures/Forms

Form Required? Yes, (*Link Below*)

[D.C. FORM](#) (Rev.04/19) **(Application will NOT be processed if not notarized)**

Methods of transmission: Original signature required, mail only

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Florida

Contact Information

Department of Children & Families
Attn: Adam Walsh Record Requests
1317 Winewood Blvd. Building 6, 4th Floor
Tallahassee, FL 32399

Phone: (855) 776-2729
Fax: (850) 487-6064
Keycee Marshall
Phone: (850) 487-6053

Procedures/Forms

Form Required? Yes (*Link Below*)

Florida FORM

Methods of transmission: Fax

Fee: No

adamwalsh.requests@myflfamilies.com

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Georgia

Contact Information

Georgia DHS- Division of Family and Children Services
Attn: Office of Safety Services
2 Peachtree St. NW 18th Floor
Atlanta, GA 30303

Contact: Magda Warner-Hulitt
Phone: (404) 463-7287

georgiaadamwalshcheck@dhs.ga.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Georgia FORM](#) (Rev.07/18/2019)

(Applications will NOT be processed if not typed)

Method of transmission: Email only

Include all identifying information for the individual and purpose of request on letterhead.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Guam

Contact Information

Bureau of Social Services Administration
Department of Public Health & Social Services
194 Hernan Cortez Avenue, #309
Hagatna, Guam 96910

Phone: (671) 475-2653/2672
Fax: (671) 477-0500

Procedures/Forms

Form Required? No. Print request for information on letterhead.

Methods of transmission: Will accept E-mail or Fax to expedite process but requires original form by Mail to release information.

Fee: No

Linda.rodriquez@dphss.guam.gov

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Hawaii

Contact Information

Oahu Child Welfare Services Section 3
Attn: Tonia Mahi
420 Waiakamilo Road, #300A
Honolulu, HI 96817

Phone: (808) 832-0609
Fax: (808) 832-0628

Procedures/Forms

Form Required? Yes (*Link Below*)

[Hawaii FORM](#) (Rev.04/2014)

Methods of transmission: Original signature required, mail only.

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

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Idaho

Contact Information

IDHW Criminal History Unit
Attn: CWIS
P.O. Box 83720
Boise, ID 83720

Phone: (208) 332-7990
Fax: (208) 332-7991

crimhist@dhw.idaho.gov

Fernando Castro
castrof@dhw.idaho.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Idaho FORM](#) (Rev.04/2019) [HELP](#) (**Application will NOT be processed if not notarized**)

Methods of transmission: E-mail, Fax, or US Mail with attachment scanned in PDF format.

Fee: **\$20** (paid by CDSS)

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

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Illinois

Contact Information

Department of Family & Children Services
Attn: CANTS Unit
406 E. Monroe Street, Station 30
Springfield, IL 62701

Phone: (217) 557-0758
Fax: (217) 782-3991

cfs689background@illinois.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

Form: Yes, [Illinois FORM](#) (Rev.07/2012)

Methods of transmission: E-mail, Fax, or US Mail
Subject line: Out-of-State Child Welfare

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Indiana

Contact Information

Indiana Dept of Child Services
Attn: Background Check Unit
302 W. Washington Room E306-MS08
Indianapolis, IN 46204

Phone: (317) 234-4410
Fax: (317) 232-2132
Contact: Background Check Unit
COBCUinquiry@dcs.in.gov

Procedures/Forms

Form Required? No, send CDSS/CBCB applicant information to include Legal Name, Date of Birth, SSN, Phone Number and Email Address. **Previous address information is REQUIRED for all applicants. Please enter all past addresses dating back to either January 1, 1988 or your Date of Birth, whichever is most recent.**

Example 1: If your Date of Birth is 06/05/1995, enter your past addresses dating back to June 1995.

Example 2: If your Date of Birth is 03/16/1963, enter your past addresses dating back to January 1988

Note: Address dates may NOT overlap or have any gaps in time between them, or else you will not be able to submit the form. Methods of transmission: **Online Portal**. CBCB fills out online form and an email will go out to the applicant. A portion will need to be filled out by the applicant, then Indiana will send results directly to CBCB.

Fee: No

[Indiana DCS Background Check Webpage](#)
[ONLINE PORTAL](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Iowa

Contact Information

Iowa Department of Human Services
Attn: Central Abuse Registry
P.O. Box 4826
Des Moines, IA 50305

Phone: (515) 362-7404
Fax: (515) 564-4112

Linda Chagoya

DHSAbuseRegistry@dhs.state.ia.us

Procedures/Forms

Form Required? Yes (*Link Below*)

[Iowa FORM](#) (Rev.02/2016)

Methods of transmission: **Fax**

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Kansas

Contact Information

Kansas Department for Children & Families
Attn: CAN Central Registry
P.O. Box 2637
Topeka, KS 66601

Fax: (785) 296-8609

DCF.CentralRegistry@ks.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Kansas FORM](#) (Rev.09/2018)

Methods of transmission: E-mail, Fax, or US Mail

Fee: No fee for state agencies, all others must pay **\$10** per form.

Website

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Kentucky

Contact Information

Cabinet for Health & Family Services, DCBS
Attn: Records Management Section
275 East Main Street, 3E-G
Frankfort, KY 40621

Phone: (502) 564-3834
Fax: (502) 564-9554

Contact: Amy Phelps AmyE.phelps@ky.gov

Procedures/Forms

Form Required? No. Print request on letterhead. Include reason for your request, applicant(s) full name, maiden name (if applicable), date of birth, and full social security number.

CBCB representative MUST sign the request.

Methods of transmission: E-mail, Fax, or US Mail

Fee: No

Website

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Louisiana

Contact Information

Louisiana Department of Children & Family Services – Child Welfare
Attn: CPS Intake
P.O. Box 3318
Baton Rouge, LA 70821

Phone: (225) 342-9928
Fax: (225) 342-3480

Lori Miller
DCFS.ChildProtectiveServices@LA.GOV

Procedures/Forms

Form: Yes, [Louisiana FORM](#) (Rev.07/2018) - **Also, copy of valid Photo ID**

The following types of clearances must be submitted through the Louisiana Child Abuse and Neglect Clearance System (CANS):

Requests for Out of State Agencies conducting home studies for foster children or as part of an open child welfare case (no fee currently)

CANS system can be accessed through the following link: [CANS Online Portal](#)

Please visit the following website for additional information: [Website](#)

1. Select Child Welfare (on the left) under service providers
2. Then select Child Abuse/Neglect Background checks (on the left) under Child Welfare
3. Finally click on the following link, [CANS](#), provided in the fourth paragraph.

Fee: No

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Maine

Contact Information

DHHS, Office of Child & Family Services
Attn: Child Protective Intake Unit
2 Anthony Avenue, SHS #11
Augusta, ME 04333

Phone: (800) 452-1999 ext. 2
Fax: (207) 287-5065

Procedures/Forms

Form Required? No. Print request for information on letterhead.

Methods of transmission: Mail or Fax

Fee: No

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Maryland

Contact Information

Maryland Department of Human Resources In-Home Services
Attn: Social Services Administration
311 W. Saratoga Street, Room 553
Baltimore, MD 21201

Phone: (800) 332-6347 or
(410) 767-7112

Procedures/Forms

Form Required? Yes (*Link Below*)

[Maryland FORM](#) (Rev.03/2017)

(Applications will NOT be processed if not typed and notarized)

Methods of transmission: Original signature required, mail only.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Massachusetts

Contact Information

Massachusetts Dept. of Children & Families
Attn: Background Check Unit
2 Boylston Street, 5th Floor
Boston, MA 02111

Phone: (857) 338-3030
Fax: (617) 748-2441
MA.CPS.Check@MassMail.State.MA.US

Procedures/Forms

Form Required? Yes (*Link Below*)

[Massachusetts FORM](#) (Rev.02/24/2020) (**Application will NOT be processed if not notarized**)

Methods of transmission: Mail (if requesting by mail send SASE) or Fax

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Michigan

Contact Information

Michigan Dept. of Health & Human Services
Attn: Division of Child Welfare Licensing
P.O. Box 30650
Lansing, MI 48909

Phone: (269) 337-5237
Fax: (517) 763-0280

Procedures/Forms

Form Required? Optional, but preferred (*Link Below*)

[Michigan FORM](#) (Rev.04/2019) (**Optional**)

Print request on letterhead & include following: reason for request, family names, DOB, SS#.

Methods of transmission: Fax

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Minnesota

Contact Information

Minnesota Department of Human Services
Attn: Background Studies Unit
P.O. Box 64172
St. Paul, MN 55164-0172

Phone: (651) 478-8254
Fax: (651) 431-7670

Lori Steffan

Procedures/Forms

Form Required? Yes (*Link Below*)

[Minnesota FORM](#) (Rev.02/2017)

Methods of transmission: Mail

Fee: **\$20** (paid by CDSS)

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Mississippi

Contact Information

Dept. of Human Services
Attn: Protection Unit
P.O. Box 352
Jackson, MS 39205-0352

Toll-Free: (800) 222-8000
Phone: (601) 359-4487
Fax: (601) 576-2584

Procedures/Forms

Form: **NO**, Mississippi uses **DocuSign**.

Provide CBCB with the **applicant's valid email address on the LIC-198B**. Applicant will receive an email with a link to the DocuSign to complete their portion.

Methods of transmission: DocuSign

Fee: No

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Missouri

Contact Information

Missouri Department of Social Services Children's Division
Attn: Background & Screening Unit
P.O. Box 88
Jefferson City, MO 65103

Phone: (573) 526-1438

Sara E. Smith
Sara.E.Smith@dss.mo.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Missouri FORM](#) (Rev.09/2016)

Methods of transmission: Mail or E-mail BSIUForms.CD@dss.mo.gov

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Montana

Contact Information

Montana Child & Family Services Division
Attn: Records Request

P.O. Box 8005
Helena, MT 59604-8005

Phone: (406) 841-2400
Fax: (406) 841-2487

Procedures/Forms

Form Required? Yes (*Link Below*)

[Montana FORM](#) (Rev.03/01/2013) (**Application will NOT be processed if not notarized**)

Methods of transmission: Mail (if requesting by mail send SASE) or Fax

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Nebraska

Contact Information

Nebraska Health & Human Services
Attn: DHHS Accounting
P.O. Box 94906
Lincoln, NE 68509-5026

Phone: (402) 471-9272
Fax: (402) 742-2344

Contact: CPS Central Registry

dhhs.cfscentralregistry@nebraska.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Nebraska FORM](#) (Rev.06/2018)

(Application will NOT be processed if not notarized)

Methods of transmission: Original signature required, mail only.

Fee: **\$2.50** (paid by CDSS)

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Nevada

Contact Information

Nevada Division of Child & Family Services
Attn: Nevada Central Registry
4126 Technology Way, 3rd Floor
Carson City, NV 89706

Contact: Bruce Cole
Phone: (775) 684-7941

DCFS-CANS@dcfs.nv.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Nevada FORM](#) (Rev.08/26/2010)

Methods of transmission: E-mail

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

New Hampshire

Contact Information

NH Division for Children, Youth, and Families
Attn: Central Registry, Brown Bldg.– 4th Floor
129 Pleasant Street
Concord, NH 03301

Phone: (603) 271-8383
Fax: (603) 271-4729

Contact: Susan Hallett-Cook

Procedures/Forms

Form Required? Yes (*Link Below*)

[New Hampshire FORM](#) (Rev. 12/2008)

[Consent Form](#) required

Methods of transmission: Original signature required, mail only.

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

New Jersey

Contact Information

Department of Children & Families
Attn: Office of Licensing/CARI Unit
P.O. Box 717
Trenton, NJ 08625-0717

Phone: (609) 888-7711
Toll-Free: (877) 667-9845
CARI Unit: (855) 744-4913
Contact: Judith Williams

Procedures/Forms

All requests must be electronically submitted with the correct requesting agency contact information.

How to obtain an Out-of-State CARI Background Check:

1. Identify the reason for the background check(s) (i.e. employment, domestic/international adoption for resource (foster) care.
2. Required information includes all aliases (married, maiden names, nicknames), race, date of birth, and all addresses where the person(s) resided while living in the State of New Jersey. Please include timeframe(months/years) when the individual lived in New Jersey. If the exact address is not known by the individual, the city or county that he/she lived in during the timeframe will suffice. Social security number is optional.

Fee: No

Website ONLINE PORTAL

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

New Mexico

Contact Information

CYFD Protective Services
Attn: CRC Unit Room 225
P.O. Drawer 5160
Santa Fe, NM 87502

Phone: (505) 827-8400
Contact: Ask for CRC Unit

CYFD.PSCriminalReco@state.nm.us

Procedures/Forms

Form Required? Yes (*Link Below*)

[New Mexico FORM](#) (Rev.01/01/2018)

(Applications will NOT be processed if not typed and notarized)

Methods of transmission: Original signature required, mail only.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

New York

Contact Information

New York State Office of Children & Family Services
Attn: Statewide Central Register
P.O. Box 4480
Albany, NY 12204-0480

Form Info: (518) 474-5297
Phone: (800) 342-3720
Fax: (518) 486-3424

Roberta Frederick

Procedures/Forms

Form Required? Yes (*Link Below*)

New York FORM (Rev. 12/2017) **(Applications will NOT be processed if not notarized)**

Methods of transmission: Original signature required, mail only.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

North Carolina

Contact Information

N.C. Division of Social Services
Attn: RIL
820 S. Boylan Ave., MSC 2408
Raleigh, NC 27699-2408

Phone: (919) 527-6340
Fax: (919) 715-6714

Procedures/Forms

Form Required? Yes (*Link Below*)

[North Carolina FORM](#) (Rev. 12/2013)

Method of transmission: Fax

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

North Dakota

Contact Information

Children & Family Services
Attn: CBCU
600 E. Boulevard Ave, Dept. 325
Bismarck, ND 58505-0250

Phone: (701) 328-2316
Fax: (701) 328-0358

Tara Reed
dhscfscbc@nd.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[North Dakota FORM](#) (Rev.02/2019)

Methods of transmission: E-mail, Fax, or US Mail

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Ohio

Contact Information

Ohio Dept. of Job & Family Services
Attn: SACWIS Registry Search Request
P.O. Box 183204
Columbus, OH 43218-3204

Phone: (614) 752-1298
Fax: (614) 728-6726

[SACWIS Registry Request@jfs.ohio.gov](mailto:SACWIS_Registry_Request@jfs.ohio.gov)

Procedures/Forms

Form Required? Yes (*Link Below*)

[Ohio FORM](#) (Rev.08/2018)

(Applications will NOT be processed if not typed.)

Methods of transmission: Online Portal (Done by CBCB)

A government-issued Social Security Card and ONE OTHER form of appropriate Identification are required.

- Standard DL-ID or Compliant DL-ID Driver License or State Identification card.
- Birth Certificate.
- U.S. Visa (travel passport).

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Oklahoma

Contact Information

OK DHS Children & Family Services Division
Attn: Laurie Anne Morris
P.O. Box 25352
Oklahoma City, OK 73125

Request Processing Worker

Laurie Anne Morris
Phone: (405) 522-4051

Procedures/Forms

Form: No

Please Note: Oklahoma does not participate in Adam Walsh background checks for prospective foster/adoption parents.

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Oregon

Contact Information

Oregon DHS - Background Check Unit
Attn: Adam Walsh Coordinator
P.O. Box 14870
Salem, OR 97309-5066

Phone: (503) 378-5470
Fax: (503) 378-6314

Adam-Walsh.Oregon@state.or.us

Procedures/Forms

Form Required? Yes (*Link Below*)

[Oregon FORM](#) (Rev.04/2018)

Put request on agency letterhead. Include the full name, maiden name, any other akas of each applicant, their gender, DOB, SS#, reason for request: adoption or foster. Requests should state that the information is required to comply with the Adam Walsh Child Protection and Safety Act of 2006. The results will be securely emailed back.

Methods of transmission: E-mail, Fax, or US Mail

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Pennsylvania

Contact Information

PA Department of Human Services
Attn: ChildLine and Abuse Registry
P.O. Box 8170
Harrisburg, PA 17105-8170

Phone: (717) 783-6211
Toll-Free: (877) 371-5422

RA-PWCHILDLINEOOS@pa.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Pennsylvania FORM](#) (Rev. 12/2015)

Signed release required? Yes [Release Form](#)

Fee: **\$13** (paid by CDSS)

Method of Transmission: Mail

More information about Pennsylvania Child Abuse Clearances can be found at [Website](#).

[Online PA Portal](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Puerto Rico

Contact Information

Directora Centro Estatal
P.O. Box 11398
San Juan, PR 00910-1398

Phone: (787) 625-4900 x1720

Wilda Moctezuma
wmoctezuma@familia.pr.gov
Or
Damaris Medina
DMedina@familia.pr.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Puerto Rico FORM](#) (Rev. 11/2010)

Methods of transmission: E-mail: wmoctezuma@adfan.pr.gov

Fee: No

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Rhode Island

Contact Information

Department of Children, Youth, and Families
Attn: Record Center 2nd Floor
101 Friendship Street
Providence, RI 02903

Phone: (800) 742-4453
(401) 528-3842
Fax: (401) 528-3480

Contact: Jan Mitchell Janice.mitchell@dcyf.ri.gov

Procedures/Forms

Form Required? No

Request on Agency Letterhead (including name, any maiden name or alias, date of birth, last four of their SS, and where they resided in RI).

Signed release required? Yes, and witnessed

Methods of transmission: US Mail or Fax

Fee: **\$10** - State agencies outside of Rhode Island are not required to pay the fee.

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

South Carolina

Contact Information

South Carolina Dept. of Social Services
Attn: Central Registry
1535 Confederate Ave.
P.O. Box 1520
Columbia, SC 29202-1520

Phone: (803) 898-7318
Fax: (803) 898-7641

Contact: Portia T. Hawkins
portia.hawkins@dss.sc.gov
or
Louise Cooper
louise.cooper@dss.sc.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[South Carolina FORM](#) (Rev.05/2018)

Form must be witnessed **OR** notarized. Witness **OR** notary **MUST SIGN** form.

Methods of transmission: Original signature required, mail only.

Fee: **\$8** (paid by CDSS)

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), **both signed, including** “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

South Dakota

Contact Information

DSS - Division of Child Protection
Attn: Nicole LeBeau – Central Registry
700 Governors Drive
Pierre, SD 57501-2291

Phone: (605) 773-3227
Fax: (605) 773-6834

Nicole LeBeau
nicole.lebeau@state.sd.us

Procedures/Forms

Form Required? Yes (*Link Below*)

[South Dakota FORM](#) (Rev.01/2018) (**Applications will NOT be processed if not notarized**)

Methods of transmission: Original signature required, mail only.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including “witness signature” on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the “Requestor” and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Tennessee

Contact Information

Tennessee Dept. of Children's Services
Attn: UBS Tower, 7th Floor (Due Process Procedure)
315 Deaderick Street
Nashville, TN 37243

Larry Phillips
Phone: (615) 532-9856

EI_DCS_CPS_CentralRegistryCheck@tn.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Tennessee FORM](#) (Rev.09/2019)

Authorization to release information is required. **NOTE:** This is NOT a TN form.

Methods of transmission: E-mail Only: EI_DCS_CPS_CentralRegistryCheck@tn.gov
In the subject line enter Out of State Request along with applicant's first initial and last name.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

Attention California FFH and FFAs: CBCB requires that applicants are Live Scanned prior to sending required documents. Required documents include the [LIC 508D](#), [LIC 198B](#), both signed, including "witness signature" on the [LIC 198B](#), and a State Form if applicable. The requestor field can be left blank since the CDSS Adam Walsh Unit must always be the "Requestor" and sign the form. CDSS will pay all Out-of-State processing fees, if applicable.

Texas

Contact Information

Texas Department of Family & Protective Services
Attn: CBCU TX Abuse Neglect, M/C 121-7
P.O. Box 149030
Austin, TX 78714-9030

Phone: (800) 645-7549
Fax: (512) 339-5829

Procedures/Forms

Form Required? Yes (*Link Below*)

[Texas FORM](#) (Rev.09/2017) (**Applications will NOT be processed if not notarized**)

Fee: No

Website

TXAbuseNeglectBGC@dfps.state.tx.us

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Utah

Contact Information

Division of Child & Family Services
Attn: Child Abuse Background Screening
195 North 1950 West
Salt Lake City, UT 81116

Phone: (801) 538-4466
Fax: (801) 538-3993

Cherri Joy
dcfscentralregistry@utah.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Utah FORM](#) (Rev.09/2019) **Also, a valid Photo ID, Driver's License, or Passport**

Methods of transmission: E-mail, Fax, or US Mail

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Vermont

Contact Information

DCF-Child Protection Registry
Attn: Child Abuse Registry Unit
HC 1 North Bldg. B 280 State Drive
Waterbury, VT 05671-1080

Phone: (802) 541-0873
Fax: (802) 241-3301

JoAnn Berno
JoAnn.Berno@vermont.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Vermont FORM](#) (Rev.03/31/2017) (**Applications will NOT be processed if not notarized**)

Methods of transmission: Original signature required, mail only.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

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Virginia

Contact Information

Virginia Dept. of Social Services Office of Background Investigations
Attn: Central Registry Search Unit
801 East Main Street, 6th Floor
Richmond, VA 23219-2901

Phone: (804) 726-7099
Fax: (804) 726-7897

Kristen Eckstein

Procedures/Forms

Form required? Yes (*Link Below*)

[Virginia FORM](#) (Rev.08/2015) **(Applications will NOT be processed if not notarized)**

Methods of transmission: Original signature required, mail only.

Fee: Yes - **\$10** (*paid by CDSS*)

Website

crs_operations@dss.virginia.gov

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

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Virgin Islands

Contact Information

Department of Human Services Children & Family Services
Attn: Division Intake and Emergency Services Knud Hansen Complex
1303 Hospital Ground
St. Thomas, VI 00802

Phone: (340) 774-0930 x4393
Fax: (340) 774-0082

Carla Benjamin carla.benjamin@gmail.com

Procedures/Forms

Form Required? No

Request on Agency Letterhead (including name, any maiden name or alias, date of birth, and Virgin Island address.

Method of transmission: E-mail

Fee: No

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Washington

Contact Information

D.C.Y.F. (Department of Children, Youth, and Families)
Attn: FISCAL
P.O. Box 40970
Olympia, WA 98504-0970

Phone: (800) 562-5624
Fax: (206) 341-7930

Lucy McCornell

CANhistorychecks@dcyf.wa.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Washington FORM](#) (Rev. 10/2019)

(Applications will NOT be processed if not typed.)

Methods of transmission: E-mail, Fax, or US Mail

Fee: **\$20** (*paid by CDSS*)

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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West Virginia

Contact Information

West Virginia DHHR
Attn: Background Screening
350 Capitol Street, RM 691
Charleston, WV 25301

Phone: (304) 558-4408
Fax: (304) 558-5354

Elizabeth Hughes
Elizabeth.A.Hughes@wv.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[West Virginia FORM](#) (Rev.05/01/2019)

Methods of transmission: Original signature required, mail only.

Fee: No

[Website](#)

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

This document changes frequently, always refer to the latest version on the CDSS Adam Walsh Page: <http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Adam-Walsh>

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Wisconsin

Contact Information

Department of Children and Families
Attn: Division of Safety and Permanence
201 E. Washington Street
Madison, WI 53703

Fax: (608) 226-5521

CWBckgrdRequests@wisconsin.gov

Procedures/Forms

Form Required? Yes (*Link Below*)

[Wisconsin FORM](#) (Rev. 10/2018)

Methods of transmission: E-mail or Fax

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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Wyoming

Contact Information

Department of Family Services
Attn: Central Registry
2300 Capitol Ave. 3RD Floor
Cheyenne, WY 82002

Phone: (307) 777-8538
Fax: (307) 777-3693

Stephanie Knowles
(307) 777-5894 stephanie.knowles@wyo.gov
or
Heidi Teasley
(307) 777-8538 heidi.teasley@wyo.gov

Procedures/Forms

Form Required? Yes, (*Link Below*)

[Wyoming FORM](#) (Rev.07/01/2018)

Methods of transmission: Original signature required, mail only. Must be submitted within 60 days of signature date.

Fee: No

Website

Updates to the information listed should be directed to: CBCBAnalyst39@dss.ca.gov

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