

# OUT-OF-STATE DISCLOSURE & CRIMINAL RECORD STATEMENT

Foster Family Homes, Certified Family Homes, Resource Families, Tribally Approved Homes

Complete all pages and sign on page 2.

## I. INSTRUCTIONS

State law requires that a person associated to a licensed foster family home, certified family home or a resource family home be fingerprinted and sign a declaration under penalty of perjury regarding any prior criminal conviction other than an infraction. A conviction means a plea or verdict of guilty or a conviction following a plea of nolo contendere (no contest). The fingerprints will be used to obtain a copy of the individuals criminal history from the Department of Justice.

You must disclose convictions, including reckless and drunk driving convictions, even if:

- They happened a long time ago;
- They were only a misdemeanor;
- You didn't have to go to court (your attorney went for you);
- You had no jail time, or the sentence was only a fine or probation;
- You received a certificate of rehabilitation; or
- The convictions were later expunged, dismissed, set aside, or the sentence was suspended.

You need not disclose any marijuana-related offenses covered by the marijuana reform legislation codified at Health and Safety Code sections 11361.5 and 11361.7, any infractions, or any convictions for which relief has been granted pursuant to Penal Code section 1203.49.

## II. CRIMINAL RECORD STATEMENT

A. Have you ever been convicted of a crime, not including an infraction, in California?  YES  NO

B. Have you ever been convicted of a crime, not including an infraction, in another state, federal court, military, or a jurisdiction outside of the U.S.? (Criminal convictions from another state or federal court are considered as if they occurred in California)  YES  NO

C. For Foster Family and Certified Family Homes & Resource Families only: Have you ever been arrested for a crime against a child (including child pornography) or spousal/cohabitant abuse (including domestic violence, battery, or willful infliction of corporal injury)?  YES  NO

D. For all questions above, please provide details regarding the type of offense(s), location(s), and date(s) in which each crime occurred.

1. What was the offense?

2. In which state and city did you commit the offense?

3. When did this happen?

Senate Bill 354 (Chapter 687, Statutes of 2021) Exemptions: Are you associated to a resource family home or an application for resource family approval (RFA) where the applicant or resource family is seeking or has placement of a child who is their relative?  YES  NO

If **YES**, please check the box that best describes the reason you are fingerprinting and provide the child(ren)s full legal name:

- I'm an Applicant
- I'm an adult resident in the applicant's home

If you are a resident in the home, please provide the applicant(s) full legal name:

- I'm regularly present in the RFA applicant's home or a resource family home.

**III. OUT-OF-STATE DISCLOSURE**

**Have you lived in a state other than California within the last five years?**  YES  NO

If **YES**, complete section below. (This question is **not** required for adults regularly present but **not** residing in the home.)

**OUT OF STATE ADDRESSES IN THE PAST 5 YEARS**

Date From	Date To	Street	City	State

**IV. SUBSTANTIATED REPORTS OF CHILD ABUSE OR NEGLECT**

**Have you ever had a substantiated finding of child abuse or neglect made against you in this state or any state?** (For adults regularly present but not residing in the home, please disclose **only** substantiated reports that occurred in California.)

- YES (Complete section below)
- NO, I have not had a substantiated finding against me in any child abuse or neglect report.

Date	City	State	County	Circumstances (Attach separate page if necessary)

**NOTE:** IF THE CRIMINAL BACKGROUND CHECK REVEALS ANY CONVICTION(S) THAT YOU DID NOT DISCLOSE ON THIS FORM, YOUR FAILURE TO DISCLOSE THE CONVICTION(S) MAY RESULT IN AN EXEMPTION DENIAL, APPLICATION DENIAL, LICENSE REVOCATION, DECERTIFICATION, RESCISSION OF APPROVAL, OR EXCLUSION FROM A LICENSED FACILITY, CERTIFIED FAMILY HOME, OR THE HOME OF A RESOURCE FAMILY, OR TRIBALLY APPROVED HOME.

Licensed Facility, Certified Family Home, or Resource Family Name:		Facility Number:
Your Name (Print Clearly):		
Your Address (Street, City, State, Zip):		
Social Security Number: (See Privacy Statement on Page 3)	Driver's License Number/State:	Date of Birth:

**V. DECLARATION**

*I declare under penalty of perjury under the laws of the State of California that the above information is true and correct to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you have any questions about this form, please contact your local licensing regional office or approval agency.*

**INSTRUCTIONS TO LICENSEES ONLY:**

If the person discloses a criminal conviction, review the person's statement and discuss it with your Licensing Program Analyst (LPA). Maintain this form in your facility personnel file and send a copy to your LPA.

**INSTRUCTIONS TO REGIONAL OFFICES AND FOSTER FAMILY AGENCIES:**

If the person discloses that they have lived in another state within the last five (5) years, send this form to the Care Provider Management Bureau, 744 P Street, MS T9-15-62, Sacramento, CA 95814.

**PRIVACY NOTICE**

As Required by Civil Code § 1798.17

**Collection and Use of Personal Information:** The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) and the Care Provider Management Branch (CPMB) in the California Department of Social Services (CDSS) collects the information requested on this form as authorized by Penal Code sections 11100-11112; Health and Safety Code sections 1522, 1522.1, 1569.10-1569.24, 1596.80-1596.879; Family Code sections 8700-8720; Welfare and Institutions Code sections 16500-16523.1; and other state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled, or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

**Providing Personal Information:** All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request. Notice is given for the request of the Social Security Number (SSN) on this form. The California Department of Justice uses a person's SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check.

**Access to Your Information:** You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

**Possible Disclosure of Personal Information:** In order to be licensed, work at, or be present at, a licensed facility/organization, or be placed on a registry administered by the Department, the law requires that you complete a criminal background check. (Health and Safety Code sections 1522, 1568.09, 1569.17 and 1596.871). The Department will create a file concerning your criminal background check that will contain certain documents, including personal information that you provide. You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798 et seq.).

**IMPORTANT INFORMATION**

Under the California Public Records Act (Government Code section 7920.000 et seq.), the Department may have to provide copies of some of the records in the file to members of the public who ask for them, including newspaper and television reporters (news media).

In addition, the Department is required to tell people who ask, including the news media, if someone in a licensed facility/ organization has a criminal record exemption. The Department must also tell people who ask the name of a licensed facility/organization that has a licensee, employee, resident, or other person with a criminal record exemption. This does not apply to Resource Family Homes, Small Family Child Care Homes, or the Home Care Aide Registry. The Department shall not release any information regarding Home Care Aides in response to a Public Records Act request, other than their Home Care Aide number.

The information you provide may also be disclosed in the following circumstances:

- To other persons or agencies where disclosure is necessary for them to perform their legal duties, and their use of your information is compatible and complies with the law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

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**QUESTIONS ABOUT NOTICE AND RECORD INFORMATION**

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For questions about this notice, CDSS programs, and the authorized use of your criminal history information, please contact your local licensing regional office. Regional offices can be found by visiting the Community Care Licensing Division (<https://cdss.ca.gov/inforesources/community-care-licensing>) and choosing the appropriate option under Quick Links - Regional Contacts.

For further questions about this notice or your criminal records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at [keeperofrecords@doj.ca.gov](mailto:keeperofrecords@doj.ca.gov), or by mail at:

Department of Justice  
Bureau of Criminal Information & Analysis Keeper of Records  
P.O. Box 903417  
Sacramento, CA 94203-4170

**Applicant Notification and Record Challenge**

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. You can find additional information on the FBI website at:

<https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

**FEDERAL PRIVACY ACT STATEMENT**

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

**Noncriminal Justice Applicant's Privacy Rights:** As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification<sup>1</sup> that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.<sup>2</sup>
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.<sup>3</sup>

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.<sup>4</sup>

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) You can find additional information on the FBI website at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

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1 Written notification includes electronic notification but excludes oral notification.

2 <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

3 See 28 CFR § 50.12(b)

4 See U.S.C. § 552a(b); 28 U.S.C. § 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)