Arkansas Department of Human Services
Division of Children and Family Services
STATE POLICE CRIMINAL RECORD CHECK

Check all that apply.

Provisional Foster Home ☐ *Regular Foster Home* ☐ *Adoptive Home* ☐

ICPC ☐ *Home Study* ☐ *The C.A.L.L.* ☐

Expedited Check ☐ Regular Check ☒

COURT ORDERED? YES ☐ NO ☒

****Provisional Foster Home and Court Ordered Checks will be expedited.**

THIS SECTION TO BE COMPLETED BY DCFS WORKER

SHARP County Requesting Check and Report	JUNE FOX Name of DCFS Worker Requesting the Check
(870) 856-1053 Telephone Number	STAFF DEV. COORDINATOR Title
1467 HIGHWAY 62 / 412 Street Address/County Number	BEKI DUNIGAN Area Manager or Adoption Supervisor
HARDY AR 72542 City State Zip Code	 Date of Request

THIS SECTION TO BE COMPLETED BY THE PERSON TO BE CHECKED

LEGAL NAME: _____
Last (Include Jr., II, III) First Middle

MAIDEN NAME / ALIAS NAME: _____

CURRENT MAILING ADDRESS: _____

DATE OF BIRTH: _____ AGE: _____ RACE: _____ SEX: Male ☐ Female ☐

SOCIAL SECURITY NUMBER: _____ DRIVER'S LICENSE (DL) OR IDENTIFICATION (ID) NUMBER: _____

DL / ID ISSUED BY STATE OF _____ DL EXPIRATION DATE: _____

"I hereby authorize the Department of Human Services to obtain a Criminal Record Check through the Arkansas State Police in accordance with Act 1573 of 2005. I provide this consent now for current and future checks as requested by the Department of Human Services. I understand that at any time I may revoke this continuing permission in writing. "

SIGNATURE: _____ DATE: _____

SEE ROUTING INSTRUCTIONS ON THE BACK OF THIS FORM

Statement of Oath: I state on oath that the representations made herein are true and correct.

_____ _____
Signature of Applicant/Employee Date

State of Arkansas, County of _____. Subscribed and sworn to before me a Notary Public in and for the county and state aforesaid, this _____ day of _____, _____.

_____
Notary Public

My Commission Expires on _____, _____.

THIS SECTION IS TO BE COMPLETED BY THE PERSON DOING THE CHECK

_____ _____ _____
Signature of Person Doing the Check Date Check Completed Date Submitted to County