



CREATE A BACKGROUND CHECK PORTABILITY REQUEST

Quick Reference Guide (QRG)

OVERVIEW

This QRG provides an overview of how to login to your CRS account within the OBI portal, and how to complete and submit background check portability requests through the Central Registry System.

AUDIENCE

This QRG is only for licensed child day centers, licensed family day homes, licensed family day systems, applicants for licensure, religiously exempt child day centers, registered family day homes, family day homes approved by a family day system, or child day programs that enter into a contract with the Department or its agents or designees to provide child care services funded by the Child Care and Development Block Grant.

About Completing a Portability Request: The OBI Portal is accessed via the DSS website and is a public-facing site allowing providers, government agencies, and individuals to complete and submit a portability request and submit a payment for the application being submitted.

LOGIN / REGISTER

Access the OBI Portal homepage at <https://centralregistry.dss.virginia.gov/>.

A Commonwealth of Virginia Website Virginia.gov | Find An Agency

Home

Helping you every step of the way

Welcome to the Office of Background Investigations (OBI)

This web-based portal provides access for programs, facilities, and providers to create a profile to submit and pay for Central Registry Search requests based on § 63.2-1515 and Portability requests, as applicable, based on § 22.1 -289.035.

Providers and Facilities licensed and regulated by the Virginia Department of Social Services (VDSS), such as child placing agencies and children's residential facilities, will have access to the OBI web-based portal once they have registered and verified the account through the VDSS Virginia Enterprise Licensing Application (VELA).

VDSS Providers and Facilities will have access to submit and pay for Central Registry Search requests.

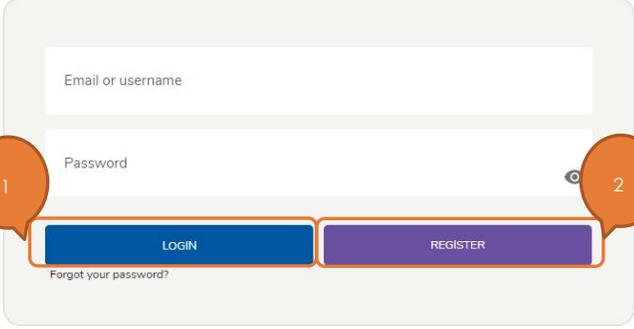
Providers and Facilities licensed and regulated by the Virginia Department of Education (VDOE), such as child care programs, school systems, Head Start programs, and other educational based programs, will have access to the OBI web-based provider portal once they have registered and verified the account. VDOE Providers and Facilities will have access to submit Central Registry Search requests and Portability requests, as applicable, based on § 22.1 -289.035. VDOE users should select DOE User type when registering for a provider portal account.

Additional Providers and Facilities will be granted access to this OBI web-based portal, selecting a relevant user type based on the type of Provider and/or Facility.

[Español](#)

To view a Spanish version of this site, click the **Español** link on the right hand side of the screen.

- Existing users: Enter your username and password and select **Login** to log in to your account.
- First-time users: Click **Register** to register for an account. Refer to the QRG for registering for an account if needed.

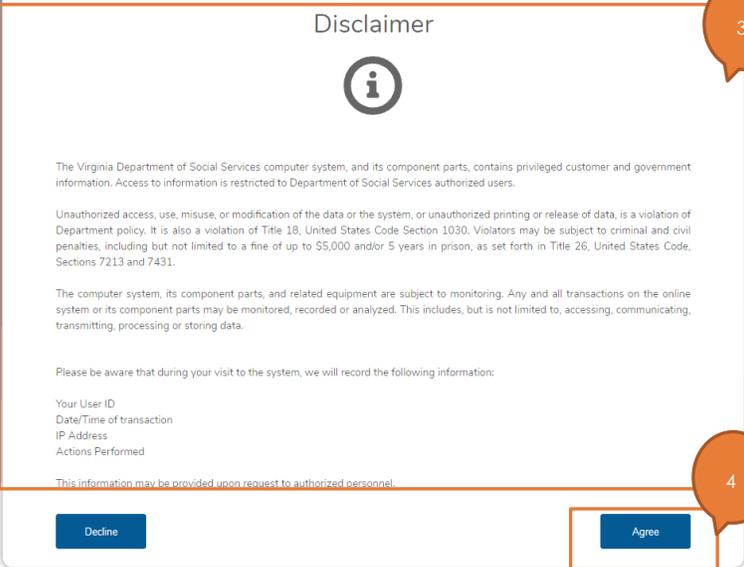



Information

The Virginia Child Abuse and Neglect Central Registry is mandated by the Virginia Child Protective Law. The search of the central registry is a check to determine if the person has ever been the subject of a founded complaint of child abuse or neglect in Virginia.

Español

- The *Disclaimer* page is displayed. Read the disclaimer statements to acknowledge that access to the information contained in the Provider Portal is restricted to Department of Social Services authorized users. Unauthorized access or misuse can result in violations, including fines or other actions.
- Click **Agree**.



Home CRS Dashboard Agency Code

Disclaimer

The Virginia Department of Social Services computer system, and its component parts, contains privileged customer and government information. Access to information is restricted to Department of Social Services authorized users.

Unauthorized access, use, misuse, or modification of the data or the system, or unauthorized printing or release of data, is a violation of Department policy. It is also a violation of Title 18, United States Code Section 1030. Violators may be subject to criminal and civil penalties, including but not limited to a fine of up to \$5,000 and/or 5 years in prison, as set forth in Title 26, United States Code, Sections 7213 and 7431.

The computer system, its component parts, and related equipment are subject to monitoring. Any and all transactions on the online system or its component parts may be monitored, recorded or analyzed. This includes, but is not limited to, accessing, communicating, transmitting, processing or storing data.

Please be aware that during your visit to the system, we will record the following information:

- Your User ID
- Date/Time of transaction
- IP Address
- Actions Performed

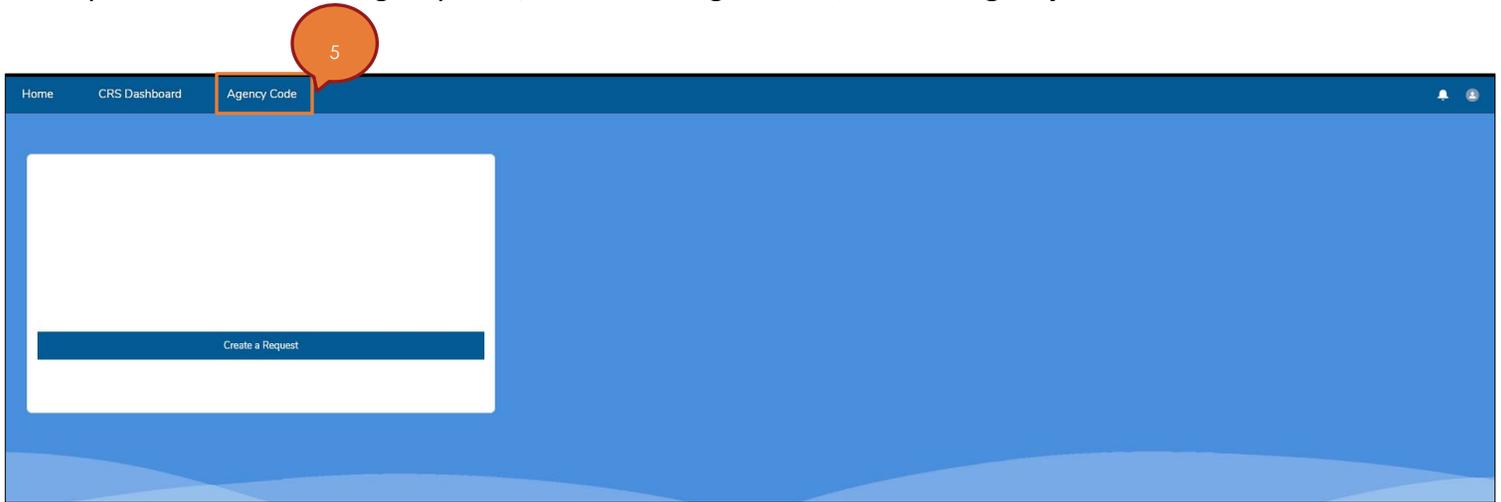
This information may be provided upon request to authorized personnel.

Decline Agree

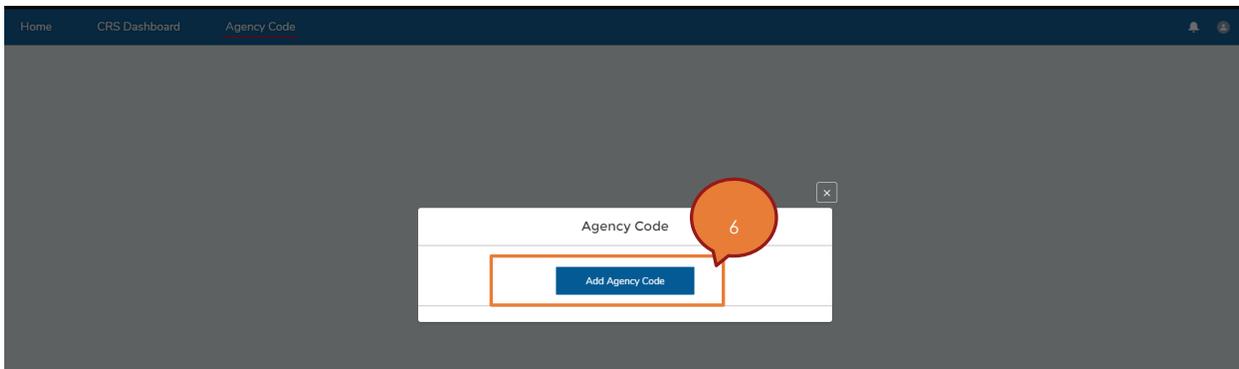
Español

The CRS Dashboard page is displayed. Providers entering the Portal for the first time, who have a historical agency code beginning with a B or U assigned to them by the Office of Background Investigations, Central Registry Search Unit, and currently documented on each search request submitted should access the Agency Code tab to enter their Agency Code in the pop-up window. **NOTE: Very few programs have an agency code. If you do not have an agency code, skip to step 9.**

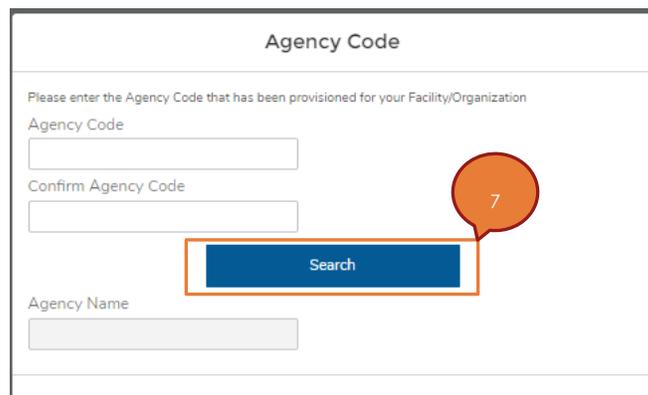
5. If you have a historical agency code, from the navigation bar, click the **Agency Code** link.



6. Click **Add Agency Code**.



7. Enter the **B or U** code assigned to your agency in the agency code boxes and click **Search**.



The screenshot shows the 'Agency Code' form. It contains the following fields and buttons:

- Agency Code (input field)
- Confirm Agency Code (input field)
- Search (button, highlighted with an orange box and callout bubble 7)
- Agency Name (input field)

The form also includes a title 'Agency Code' and a prompt: 'Please enter the Agency Code that has been provisioned for your Facility/Organization'.

- The system will prepopulate the agency name associated with the code that you entered. Review the agency name to ensure that it matches the agency that you registered with in the OBI portal. Only one email address can be associated with an agency code.

If the agency code is correct, **check the box to confirm the agency code** and then select **Save**. NOTE that the agency code cannot be corrected once you have associated your account to an agency code without IT intervention, so it is critical that you are sure it is the correct agency.

Agency Name

Match Identified. Please review the agency name and confirm by clicking save. Once saved, you will not be able to change the agency code. All determinations for Central Registry Search Requests submitted will be sent to the designated point of contact maintained by the Central Registry Unit.

Please check this box to confirm your agency code prior to saving

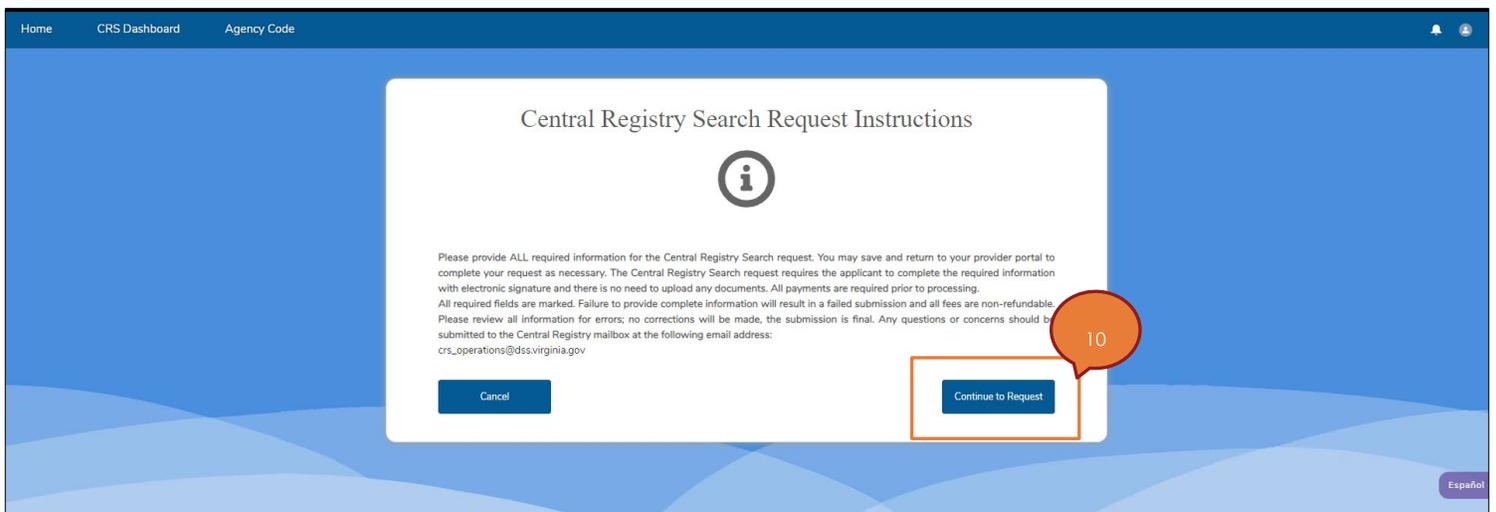
Cancel
Save

- You will be returned to the CRS Dashboard. Select **Create a Request**.



The screenshot shows the top navigation bar with 'Home', 'CRS Dashboard', and 'Agency Code'. Below the navigation bar is a large white area with a blue 'Create a Request' button at the bottom. An orange callout bubble with the number '9' points to the button.

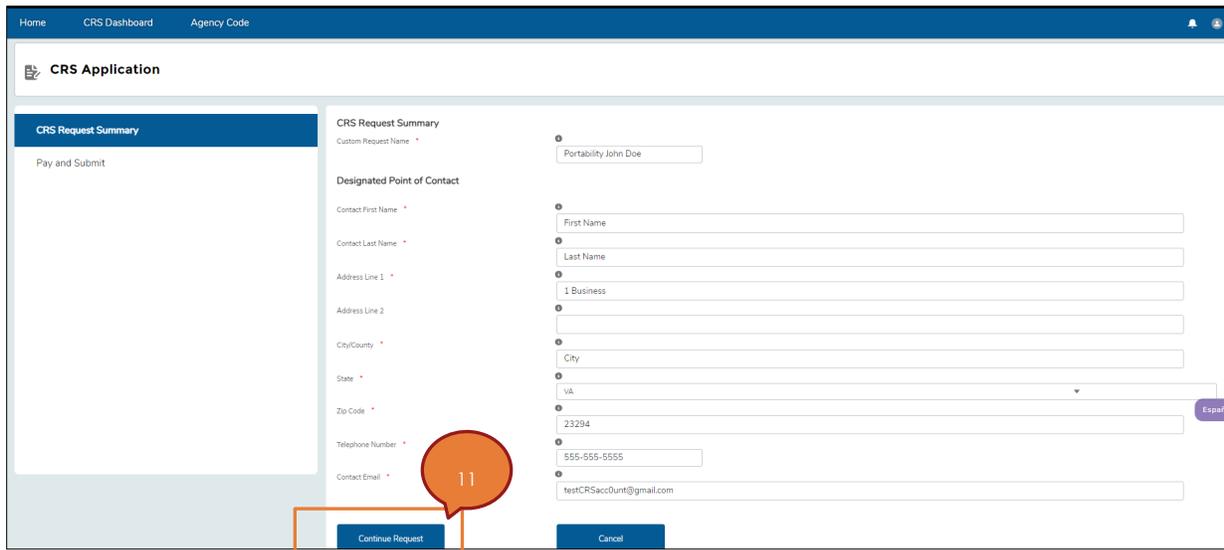
- The Central Registry Search Request Instructions will populate. Review the instructions and select **Continue to Request**. Take note that all fees are final and nonrefundable; no corrections will be made; and all submissions are final.



The screenshot shows the 'Central Registry Search Request Instructions' page. It features a white content area with a blue header, an information icon, and several paragraphs of text. At the bottom of the content area are two buttons: 'Cancel' and 'Continue to Request'. An orange callout bubble with the number '10' points to the 'Continue to Request' button.

11. You are now on the CRS Request Summary page. **Complete all required fields** indicated with a red asterisk (*).
- The custom request name field allows you to name the request for tracking purposes. For example, you may wish to enter the date and name of the individual for easy identification when searching for information (e.g., 06-30-2023 John Doe), or if you are submitting multiple requests, you may simply want to include the date (e.g., 06-30-2023 Portability Batch).
 - The Designated Point of Contact information should represent the person who will receive correspondence related to the request, including the determination letter.

Select **Continue Request** once all fields are entered.

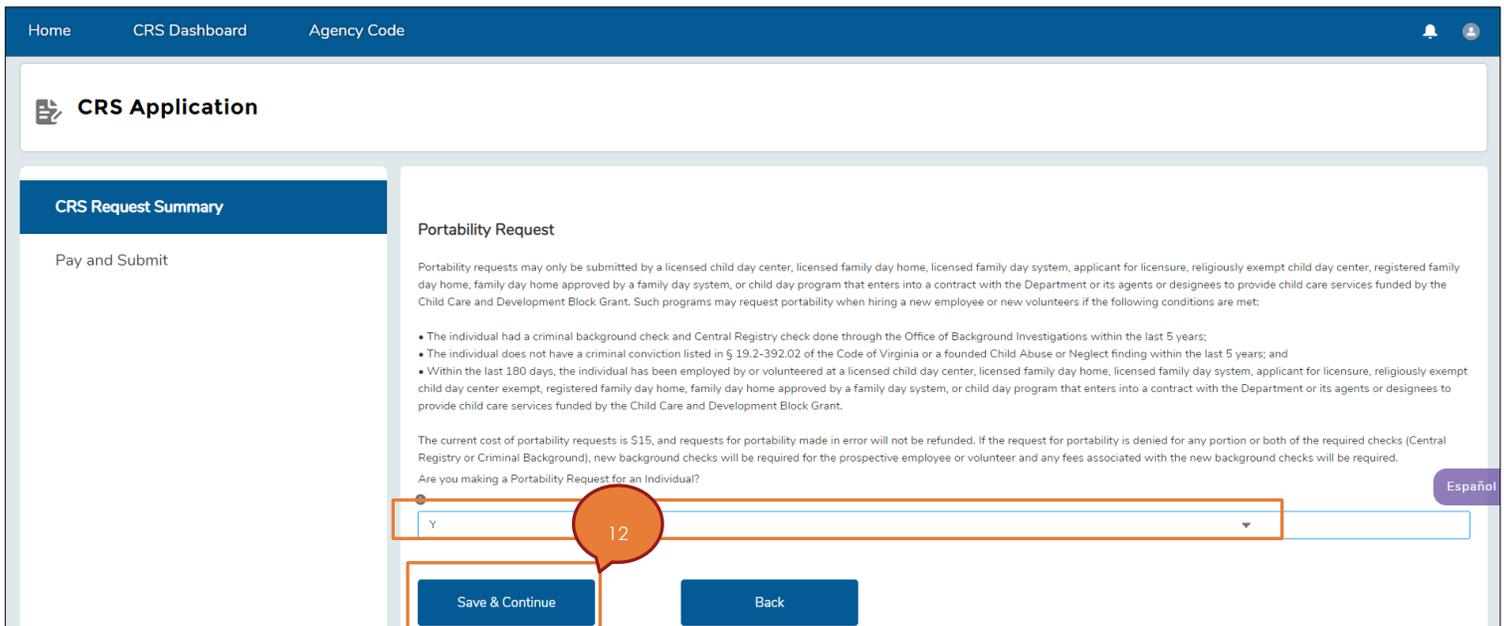


12. You are now on the Portability Request page. Read the information carefully and **use the drop-down box to select if you are submitting a background check portability request (Y/N)**. Once you have selected the appropriate response, select **Save & Continue**.

Portability requests may only be submitted for prospective employees or volunteers and may only be submitted by a licensed child day center, licensed family day home, licensed family day system, applicant for licensure, religiously exempt child day center, registered family day home, family day home approved by a family day system, or child day program that enters into a contract with the Department or its agents or designees to provide child care services funded by the Child Care and Development Block Grant. The current cost of portability requests is \$15, and requests for portability made in error will not be refunded, so it is important that you are sure the individual that you wish to submit a portability request for is eligible. The following conditions must be met:

- The individual had a criminal background check and Central Registry check done through the Office of Background Investigations within the last 5 years;
- The individual does not have a criminal conviction listed in § [19.2-392.02](#) of the Code of Virginia or a founded Child Abuse or Neglect finding within the last 5 years; and
- Within the last 180 days, the individual has been employed by or volunteered at a licensed child day center, licensed family day home, licensed family day system, applicant for licensure, religiously exempt child day center exempt, registered family day home, family day home approved by a family day system, or child day program that enters into a contract with the Department or its agents or designees to provide child care services funded by the Child Care and Development Block Grant.

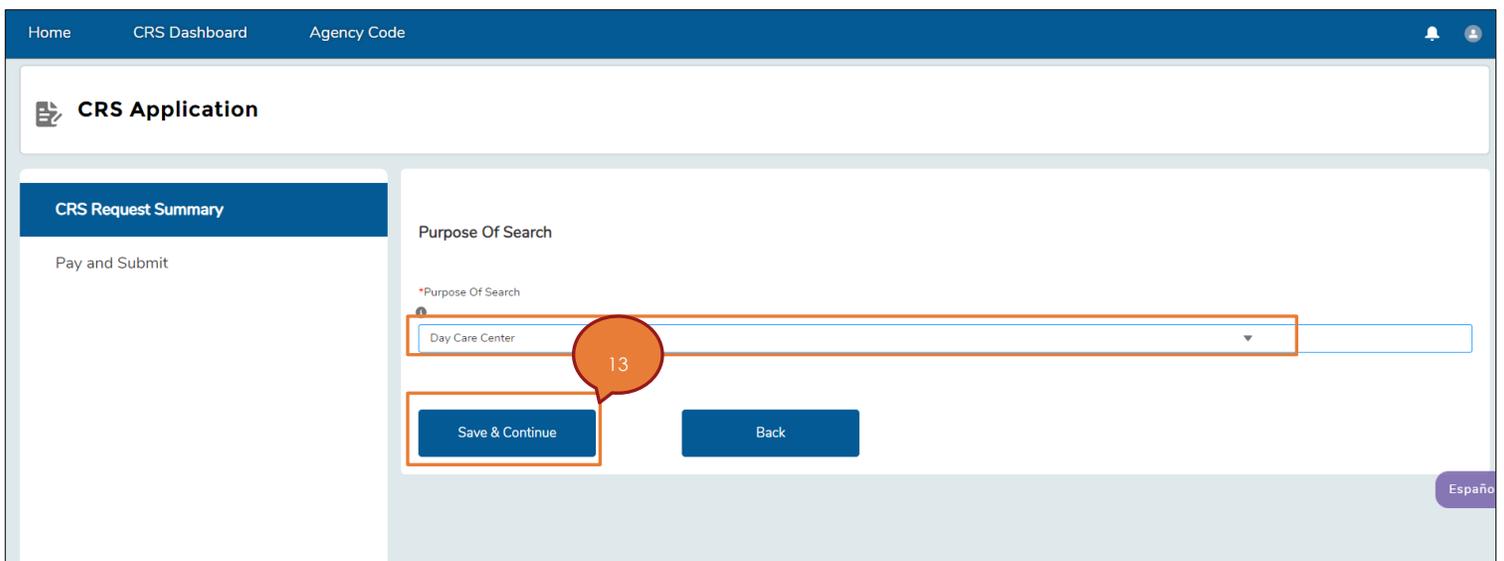
The image below shows an example where a portability request is being submitted.



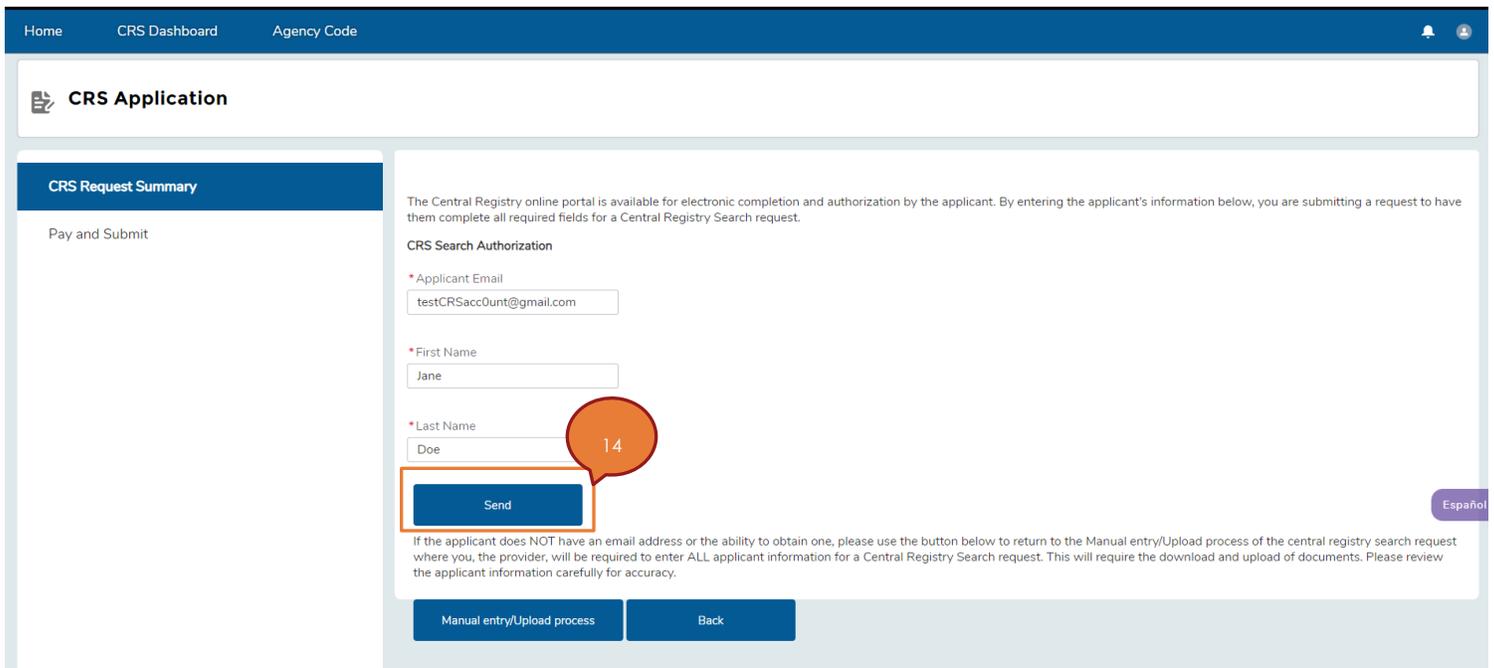
13. The Purpose of Search screen should represent the reason for the Central Registry Search, consistent with your agency type. **Use the drop-down box to select the appropriate purpose of search.**

- DOE affiliated home based child care providers should select “Babysitter/Family Day Care.”
- DOE affiliated center based child day programs should select “Day Care Center.”

After you have made your selection, select **Save & Continue**.

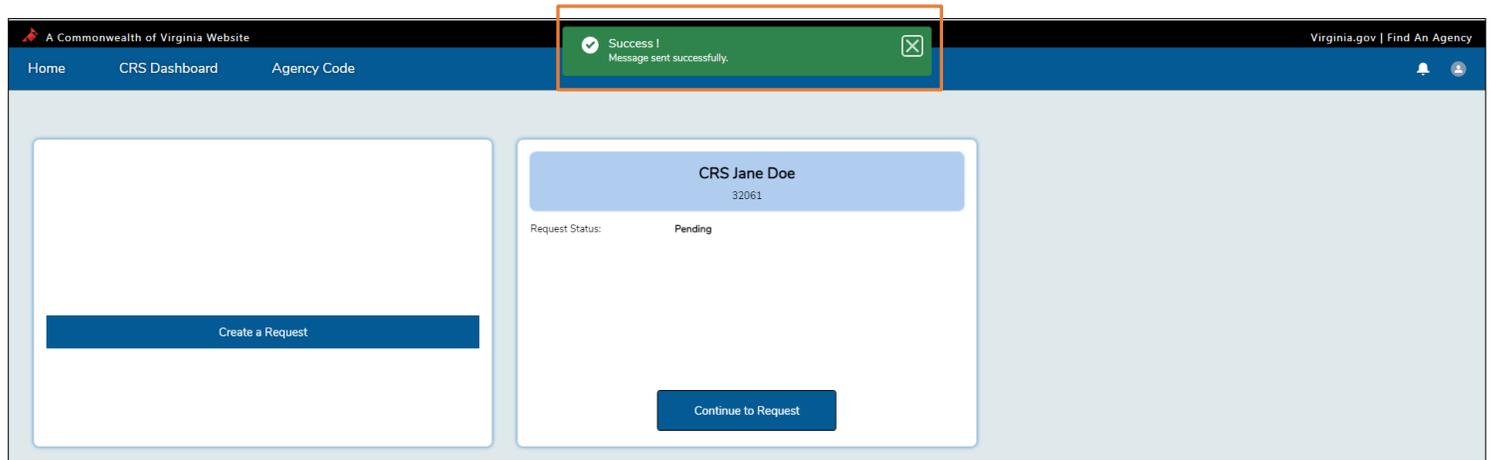


14. The CRS Search Authorization screen will appear. **Complete all required fields** indicated with a red asterisk (*), entering information specific to the prospective employee or volunteer whose name is being submitted for background check portability. Note that background check portability cannot be requested for agents, applicants for licensure, licensees, or household members. By entering the individual's information, you are sending a request to the individual to have them complete all required fields for a background check portability request. The applicant will receive an email which will contain a one-time secure link to a fillable form where they will fill out the request form, electronically sign the request, and acknowledge that they are authorizing OBI to share the results with your agency. Enter the individual's email address, first and last name, and then select **Send**.



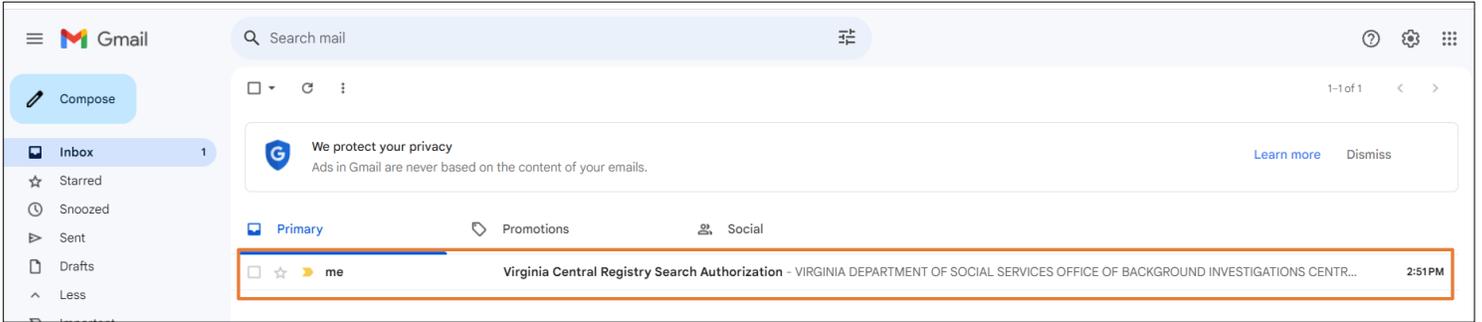
The screenshot shows the 'CRS Application' page with a 'CRS Request Summary' sidebar on the left containing a 'Pay and Submit' button. The main content area is titled 'CRS Search Authorization' and includes a brief explanation of the portal. Below this is a form with three required fields: 'Applicant Email' (testCRSacc0unt@gmail.com), 'First Name' (Jane), and 'Last Name' (Doe). A blue 'Send' button is highlighted with an orange box and a callout bubble containing the number '14'. Below the form is a note about manual entry and two buttons: 'Manual entry/Upload process' and 'Back'. A 'Español' link is visible in the bottom right corner.

15. You will see a pop up at the top of the screen indicating that the message was sent successfully, and you will return to the CRS Dashboard screen.

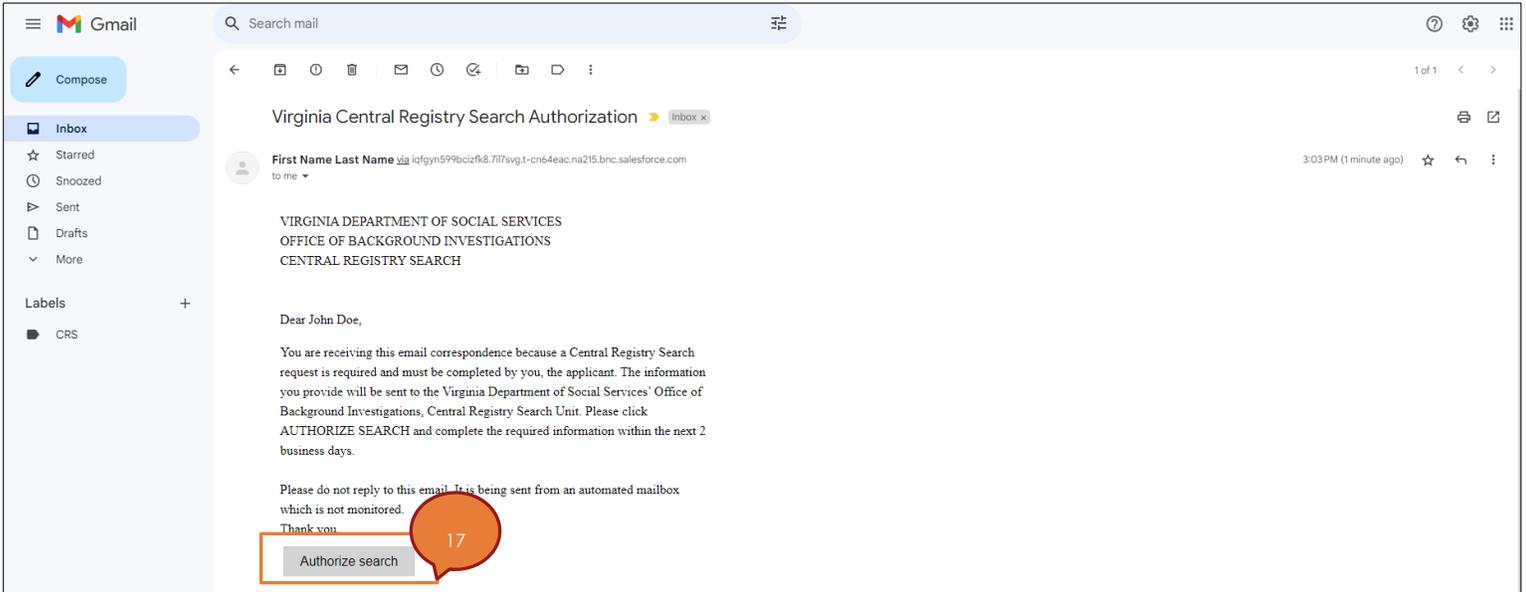


The screenshot shows the 'CRS Dashboard' page. At the top, a green success message box is highlighted with an orange border, stating 'Success! Message sent successfully.' with a close button. The dashboard includes a 'Create a Request' button on the left and a card for 'CRS Jane Doe' (ID: 32061) with a 'Request Status: Pending' and a 'Continue to Request' button. The top navigation bar includes 'Home', 'CRS Dashboard', and 'Agency Code', along with a 'Virginia.gov | Find An Agency' link and user icons.

16. Inform the individual whose name is being searched to check their email. The individual will receive an email from the Virginia Department of Social Services Office of Background Investigations titled Virginia Central Registry Search Authorization.



17. After opening the email, the individual should read the content and select **Authorize Search**.





VIRGINIA DEPARTMENT OF EDUCATION

18. Below is what the form looks like for the applicant. The individual will need to **complete all required fields** indicated with a red asterisk (*). It is important that the individual follows instructions provided within the form to avoid errors.

In the Prior Employer section, the applicant will need to enter the facility information for the child day program that he worked at within the last 180 days. The applicant will need to enter your facility information in the Current Employer section.

Once the individual has entered all the required information, he should select **Submit**.

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
OFFICE OF BACKGROUND INVESTIGATIONS - CENTRAL REGISTRY SEARCH
CENTRAL REGISTRY RELEASE OF INFORMATION

▼ DETAILS OF INDIVIDUAL WHOSE NAME MUST BE SEARCHED

First Name *	<input type="text" value="John"/>	Middle Name (Please enter NMN if not applicable) *	<input type="text" value="NMN"/>
Last Name *	<input type="text" value="Doe"/>	Maiden Name (Please enter NMN if not applicable) *	<input type="text" value="NMN"/>
Date of Birth *	<input type="text" value="mm/dd/yyyy"/>	Race *	<input type="text" value="Caucasian"/>
Sex *	<input type="text" value="Male"/>	Marital Status *	<input type="text" value="Single"/>
SSN *	<input type="text" value="111-11-1111"/>	Drivers License Number	<input type="text"/>
Other Names	<input type="text"/>		

▼ CURRENT ADDRESS

Street Address *	<input type="text" value="1 Home"/>	Floor/Apt/Suite/Unit/Room	<input type="text"/>
City *	<input type="text" value="City"/>	State *	<input type="text" value="VA"/>
Zip *	<input type="text" value="23294"/>		

▼ PRIOR ADDRESSES: Enter all your prior addresses

STREET ADDRESS	FLOOR/APT/UNIT/SUITE	CITY	STATE	ZIP	START DATE	END DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="--None--"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="mm/dd/yyyy"/>

▼ PRIOR EMPLOYER: Enter all your prior employers

EMPLOYER NAME	START DATE	END DATE	STREET ADDRESS	FLOOR/APT/UNIT/SUITE	CITY	STATE	ZIP
<input type="text" value="Daycare 1"/>	<input type="text" value="01/02/2020"/>	<input type="text" value="05/31/2023"/>	<input type="text" value="1 Daycare Street"/>	<input type="text"/>	<input type="text" value="City"/>	<input type="text" value="VA"/>	<input type="text" value="23111"/>

▼ CURRENT EMPLOYER: Enter your current employer

EMPLOYER NAME	START DATE	END DATE	STREET ADDRESS	FLOOR/APT/UNIT/SUITE	CITY	STATE	ZIP
<input type="text" value="Daycare 2"/>	<input type="text" value="06/19/2023"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="2 Daycare Street"/>	<input type="text"/>	<input type="text" value="City"/>	<input type="text" value="VA"/>	<input type="text" value="23294"/>

▼ CERTIFICATION AND CONSENT FOR RELEASE OF INFORMATION: Sign and consent

I hereby certify that the information entered on this form is true, correct and complete to the best of my knowledge. Pursuant to Section 2.2-3806 of the Code of Virginia, I authorize the release of personal information regarding me which has been maintained by the Virginia Department of Social Services or any local department of social services which is related to any disposition of founded child abuse/neglect in which I am identified as responsible for such abuse/neglect.

Signature (Enter your first name, followed by your last name) *

Date *

18

19. After selecting submit, the individual will see a pop up at the top of the screen indicating that the completed portability (CRS) request and authorization has been returned to your agency for completion.

VIRGINIA DEPARTMENT OF SOCIAL SERVICES
OFFICE OF BACKGROUND INVESTIGATIONS - CENTRAL REGISTRY SEARCH
CENTRAL REGISTRY RELEASE OF INFORMATION

Success: Your completed Central Registry Search request and authorization has been returned to the provider

DETAILS OF INDIVIDUAL WHOSE NAME MUST BE SEARCHED

First Name * Jane Middle Name (Please enter NMN if not applicable) * NMN
Last Name * Doe Maiden Name (Please enter NMN if not applicable) * NMN

20. You can now return to the [OBI portal](#) and access the completed request form in the CRS Dashboard. Once you locate the request form recently completed by the applicant, select **Continue to Request**.

Home CRS Dashboard Agency Code

Create a Request

Portability John Doe
32072
Request Status: Pending
Continue to Request

CRS Jane Doe
32061
Request Status: Pending
Continue to Request

21. Scroll down on the screen to see the CRS Requests section. If the applicant has completed the required form and authorized the portability request, you will see that the document uploaded column indicates “yes” next to the individual’s name.

CRS Request Summary

Pay and Submit

CRS Request Summary

Custom Request Name * Portability John Doe

Designated Point of Contact

Contact First Name * First Name Last Name * Last Name
Address Line 1 * 1 Business
Address Line 2 *
City/County * City VA State * Zip Code * 23294
Telephone Number * 555-555-5555 Phone Number Ext. *
Contact Email * testorsacc0une@gmail.com

CRS Requests

FIRST NAME	LAST NAME	DOCUMENT UPLOADED	PORTABILITY REQUEST	STATUS
John	Doe	YES	YES	

Add Individual Back Save & Continue

22. You now have several options:

- Select **Add Individual** and repeat steps 12 through 21 to include more than one portability request prior to making payment;
- Select the **pencil icon to edit** the current request if you need to make a correction to the information or change the request to not include background check portability (Note that if you change the request to not include portability, you will have to enter information regarding the applicant’s marital status, spousal history, and children before downloading the CRS request form for the applicant to sign and then upload in the portal); or
- Select **Save & Continue** to proceed to payment if this is the only portability request that you wish to submit.



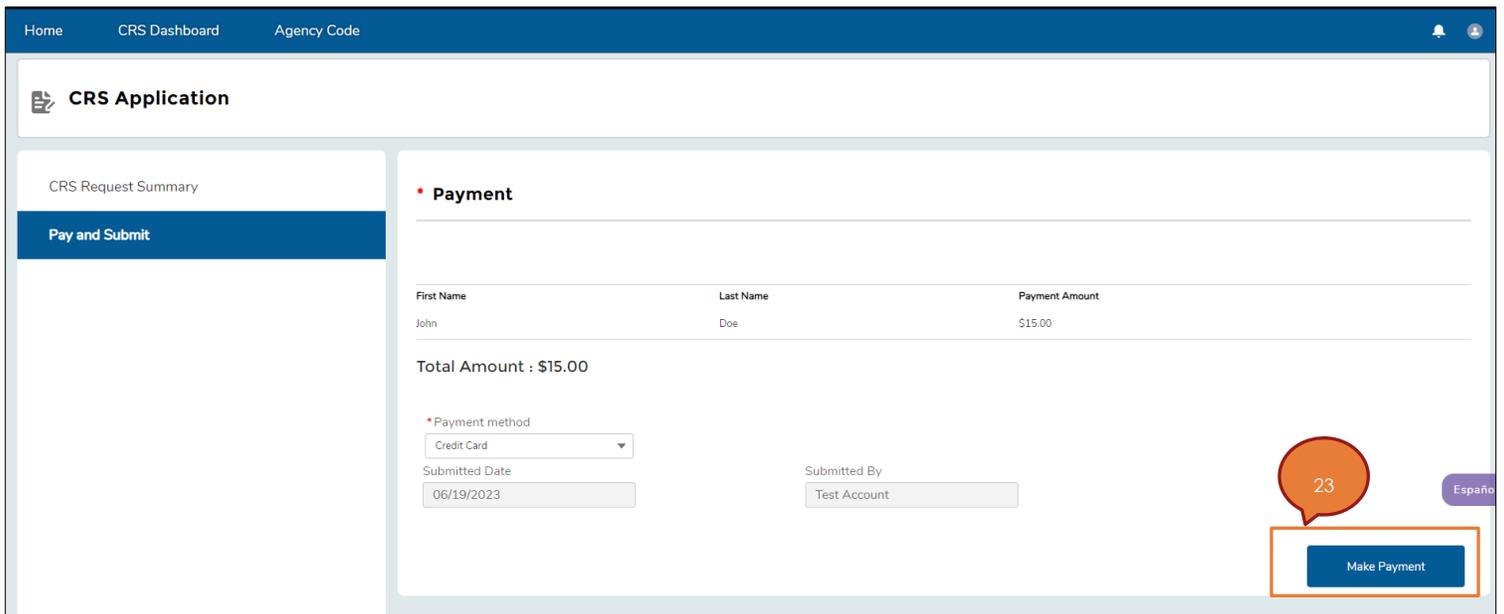
CRS Requests

FIRST NAME	LAST NAME	DOCUMENT UPLOADED	PORTABILITY REQUEST	STATUS
John	Doe	YES	NO	 

Buttons: **Add Individual** (22 a), **Back**, **Save & Continue** (22 c)

23. If you selected Save & Continue, you will now arrive at the payment screen. Payment options are credit card, debit card or automated clearing house (ACH) check. Payments are processed through Elavon, a third-party vendor and the processing fee is 2.3% per transaction. Please note that the payment is nonrefundable.

Review the payment amount to ensure that it is correct. Central Registry Search requests cost \$10 each, and background check portability requests cost \$15 each. After reviewing the payment information, **use the drop-down box to select the payment method** that you wish to use, and then select **Make Payment**.



Home | CRS Dashboard | Agency Code

CRS Application

CRS Request Summary

Pay and Submit

Payment

First Name	Last Name	Payment Amount
John	Doe	\$15.00

Total Amount : \$15.00

* Payment method:

Submitted Date: Submitted By:

Make Payment (23)



VIRGINIA DEPARTMENT OF EDUCATION

24. The payment screen will be displayed, showing the total cost including the service fee. Select **Checkout** to be taken to the Elavon payment screen.

< Return to Merchant

VIRGINIA DEPARTMENT OF SOCIAL SERVICES

Service Fee separately charged by Elavon and is non-refundable. If you do not want to pay this fee, click Return to Merchant and pay by alternative means.

This page cannot be refreshed.

Order Section	
This payment will be processed as two separate payments (for Amount and Service Fee)	
Amount	15.00 USD
Service Fee (2.3%)	0.35 USD
Total of all charges and fees	15.35 USD
Service fee is non-refundable.	
Search Request ID	32072

Please be aware there is a 1 to 3 day business processing time.

Checkout

Secure Payment

25. Complete all fields in the payment screen and then select the check box to agree to the terms and conditions of the charges applied. Once all information is entered, select **Submit Payment**.

< Back to Order Section

VIRGINIA DEPARTMENT OF SOCIAL SERVICES

Service Fee separately charged by Elavon and is non-refundable. If you do not want to pay this fee, click Back to Order Section and then Return to Merchant on following screen and pay by alternative means.

This page cannot be refreshed.

Order Section	
Amount	15.00 USD
Service Fee (2.3%)	0.35 USD
Total of all charges and fees	15.35 USD
Search Request ID	32072

Billing Address		
Company		
First Name *	Last name *	
Address 1 *		
Address 2		
City *	State/Province *	Postal Code *
Country *		
Email Address *		
Phone *		

Payment	
PAYMENT CARD	
VISA	
Card Number *	
Expiration Date(MM/YY) *	CVV2 *

Please be aware there is a 1 to 3 day business processing time.

I agree to the [Terms and Conditions](#) of the charges applied

Submit Payment

To proceed, you must click on the I agree checkbox.

Secure Payment



VIRGINIA DEPARTMENT OF EDUCATION

26. You will now arrive to the final payment confirmation page. Review the information to confirm accuracy and then select **Complete** to finalize your payment. Failure to click the Complete button will result in your portability request not being submitted. It is very important that you select Complete to finalize your request. Be advised that there is a 1 to 3 business day processing time.



VIRGINIA DEPARTMENT OF SOCIAL SERVICES

Order Section	Billing Address
Amount 15.00 USD	t jh
Service Fee (2.3%) 0.35 USD	7 hj
Total of all charges and fees 15.35 USD	njk va, 89098
Confirmation	
Your payment has been approved.	
Payment Type	CREDITCARD
Transaction Type	SALE
Card Type	VISA
Card Number	40*****0002
Transaction ID	300323C44-15DFC9E9-4085-4AF8-A7AE-4B149743E86F
Date / Time	03/30/2023 11:56:22 PM
Message	APPROVAL
Approve Code	285936
Service Fee Transaction ID	300323C44-91DEDD66-EEB3-48C4-A794-B2CD26D92F5B
Service Fee Approve Code	285934
Service Fee Date / Time	03/30/2023 11:56:20 PM
AVS Response	R
CVV2 Response	U

FAILURE TO CLICK THE COMPLETE BUTTON WILL RESULT IN YOUR SEARCH REQUEST NOT BEING SUBMITTED.
 Please be aware there is a 1 to 3 day business processing time.

A receipt has been emailed to you at the email address provided.

Complete

Please do not attempt to make a 2nd payment without first checking your email. Please allow at least up to 15 minutes for receipt of payment confirmation.



27. Once an applicant’s portability request is successfully submitted, the OBI staff will process the request. Once the request has been processed, the CRS Dashboard tile for the individual’s request will be updated to indicate “Completed”, and the determination letter will be emailed to the designated point of contact email address entered.

If you have questions or concerns about your submission, email OBI at crs_operations@dss.virginia.gov. In all correspondence, please provide the following information:

- i. Indicate in the email that you are emailing OBI regarding your provider portal electronic submission;
- ii. Provide a copy of the full receipt, which was emailed to the designated point of contact listed for the account as well as the email address used in the payment portion of the search request;
- iii. Provide the applicants full name, first, middle, and last;
- iv. Include the date you CREATED the request initially and the date you SUBMITTED the request;
- v. Include what your question or concern is; and
- vi. Include a contact phone number for yourself should OBI need to contact you by phone.