

CHECKLIST FOR ADULT HOUSEHOLD MEMBERS

FULL NAME OF HOUSEHOLD MEMBER: _____

ORIGINAL BACKGROUND CHECKS Renewed every five years

- SWORN DISCLOSURE STATEMENT INDICATING NO BARRIER CRIME (In the household member's record when the person begins residing in the home or upon turning 18 years of age)*
- FINGERPRINT ELIGIBILITY LETTER (In the household member's record within 30 days of beginning to reside in the home or turning 18 years of age)*
- CHILD PROTECTIVE SERVICES REGISTRY REPORT INDICATING NO FOUNDED COMPLAINT (In the household member's record within 30 days of beginning to reside in the home or turning 14 years of age)*
- OUT OF STATE CRIMINAL HISTORY RECORD CHECK (If person has lived out of state in the past five years) (In the household member's record within 30 days of beginning to reside in the home or turning 18 years of age)*
- OUT OF STATE SEX OFFENDER SEARCH RESULTS (If person has lived out of state in the past five years) (In the household member's record within 30 days of beginning to reside in the home or turning 18 years of age)*
- OUT OF STATE CHILD ABUSE AND NEGLECT SEARCH RESULTS (If person has lived out of state in the past five years) ((In the household member's record within 30 days of beginning to reside in the home or turning 18 years of age)*
- REPORT OF TUBERCULOSIS SCREENING (Obtained every two years) _____*
Expiration Date