

JR6/ER Placement (Immediate)
 RUSH (within 24 hours)
 NORMAL (ASAP)

REQUIRED - SCCS Designee to Complete: (One Form Per Person) (Print Clearly)

Person Name: _____ Person I.D #: _____ Not in SACWIS
 Case Name: _____ Case #: _____ Intake #: _____
 Provider Name: _____ Provider#: _____
 Caseworker Name: _____
(Name) (Ext.)

Purpose: **PLACEMENT**
 Kinship Caregiver Applicant
 Adoptive Parent Applicant
 Foster Home Applicant
 Safety Plan Monitor
 Household Member
 Alternative Caregivers
 Recertification/Adoption Update

 OTHER THAN PLACEMENT
 Client
 Client's significant other
 Other: _____

Additional Checks To Be Completed by Security:

Sex Offender
 Traffic Citations
 Foreclosures/Bankruptcy

PLEASE CONDUCT A BACKGROUND CHECK ON THE FOLLOWING PERSON: (Full Legal Name) (PRINT CLEARLY)

<i>Last Name</i>	<i>First</i>	<i>Middle</i>	<i>Prior Names (All Maiden Names, Aliases, etc.)</i>	
_____ / ____ / _____	_____ - _____	_____ () - _____		
<i>DOB</i>	<i>Social Security #</i>	<i>Phone Number</i>	<i>Length at present address</i>	
_____	_____	_____	_____	
<i>Address: (Street Number and Name) (Apt. #)</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
_____		_____	_____	_____
<i>Previous Address: (Street Number and Name) (Apt. #)</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
_____		_____	_____	_____

If you have lived outside of Summit County or Ohio, list locations and dates: _____

Were you ever charged and/or convicted of a crime against a child?
 No
 Yes, If yes, the charge/conviction was: _____

Driver's License or ID#: _____ Issuing State: _____ Expiration Date: _____

Driver License Valid: Yes No, If no, why _____

Demographic Information:

Marital Status: Single Married Widowed Divorced
Race: American Indian Alaskan Native Other Pacific Islander Black/African American
 Asian Native Hawaiian White Declined (When Asked The Person Refused to State their Race)
Ethnicity/Ancestry: Hispanic/Latino Yes No
 Declined (When Asked The Person Refused to State their Ethnicity/Ancestry)

Signature: _____ Check if refused to sign Date: ____ / ____ / ____

(Over)

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DO NOT WRITE BELOW THIS LINE: (Security to Complete)

LexisNexis - Accurint	<input type="checkbox"/> None Found	<input type="checkbox"/> Attached Record Found	
Summit County Website	<input type="checkbox"/> None Found	<input type="checkbox"/> Attached Record Found	
Out-of-County Websites	<input type="checkbox"/> None Found	<input type="checkbox"/> Attached Record Found	<input type="checkbox"/> N/A
National Sex Offender Registry	<input type="checkbox"/> None Found	<input type="checkbox"/> Attached Record Found	<input type="checkbox"/> N/A

WARRANT INFO:

Please Note: When completing background checks, we make every effort to provide accurate and complete information. We can only report the information which is available to us on public records websites. However, we cannot guarantee the accuracy or completeness of the information. If you are aware that an individual has a criminal history, please briefly note that information on the background check request.

This document should remain attached to the background check when returned to the caseworker.

Background check completed by: _____ / ____ / ____
(Security Staff) (Date)

Additional Notes by Security Below: