



**Arizona**

**Centralized  
Background**

**Checks (CBC)**

**Individual User Guide**  
**September 2024**



*Your Partner For A Stronger Arizona*



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# Introduction

The Arizona Centralized Background Checks (CBC) is a web portal for Individuals, Employers, and Agencies to access background check results from the following sources:

- Arizona Department of Child Safety (DCS) Central Registry
- Arizona Adult Protective Services (APS) Registry
- Department of Public Safety (DPS) Fingerprint Clearance Card status

This guide is intended to provide instructions for **individuals** to submit a background check request for any of the following:

- Gain or retain employment or volunteer
- Become a DCS caregiver (foster care, adoption, or guardian)
- Request a background check for personal reasons

## Process Overview

Individuals who need a background check must create an account and submit a request for employment or to become a DCS caregiver (foster care, adoption, or guardian). The individual must connect their request to an employer or DCS caregiver agency account. This authorizes the employer or caregiver agency to receive the background check results.

A background check request can only be submitted by the person who needs a background check. Employer and Agency representatives cannot submit a request on behalf of an Individual but may provide assistance with the process.

When the background checks for the CBC sources are completed, an automated email will be sent to the individual and any connected employer/agency to confirm a notification is available in the Message Center. This notification will include a link by which to download the results.

Employers may add 'Agency' accounts for people who are responsible for oversight of a team, company, organization, or agency's background checks. These accounts will have access to your background check results.

Periodic automated rechecks will be performed. If new results are found since the last background check, notifications will be sent to the individual and any connected employer, and agency accounts.

The CBC will initiate notifications for annual employment background checks for each Individual account that is connected to an Employer account. The annual background check will be due 12 months from the last background check result report. The CBC will generate notifications 90 days in advance of the expiration of the current background check request. If the Individual does not submit a new request by the due date, the background check will be expired, and notification will be sent to the Employer and connected Agency accounts.

# Get Started

Does your background check require a Fingerprint Clearance Card (FCC)?

- If yes, do you already have an account with the Department of Public Safety (DPS) Public Services Portal (PSP)?
  - If yes, you do not need to create an account. Login to: [cbc.az.gov](http://cbc.az.gov). Your PSP is linked to the CBC and the following functions are shared:
    - The same account is used to login to both portals.
    - The account profile can be updated from either portal.
    - Employer/employee relationships can be updated from either portal.
    - Name changes to an account associated with DPS must be processed through the DPS PSP before they can be applied to the CBC.
  - If you need to create a DPS PSP account and submit an FCC application with the Department of Public Safety (DPS), create an account at: [psp.azdps.gov](http://psp.azdps.gov).
- If your background check does not require a Fingerprint Clearance Card, create an account at: [cbc.az.gov](http://cbc.az.gov).

## CBC Landing Page and Sign Up Page

The main landing page to get started with the CBC is located at: [cbc.az.gov](http://cbc.az.gov). **Note:** The CBC also has a mobile phone view.

Click the Sign Up option in the upper right corner of the page. The page presents this question: 'What is your role in the background check process?'

- Select 'Individual/Personal' if you need a background check for either of the following:
  - To gain or retain employment
  - For personal reasons
- Select 'Caregiver' if you need a background check to become a DCS caregiver (*foster care, adoption, or guardian*).

The [Landing page](#) also includes:

- **Contact Us:** The 'Contact Us' page provides the FAQ's, Technical Support email, and DPS PSP link.
- **Chat:** The 'Chat with Us' option provides a Virtual Assistant to help answer common questions.
- **Search:** The search option compares the search term to the Frequently Asked Questions (FAQ's) to help answer questions.
- **Frequently Asked Questions:** The Frequently Asked Questions section includes the five categories of questions.
  - General
  - Individual/Personal
  - Employer
  - Agency
  - DES
- [psp.azdps.gov](http://psp.azdps.gov): A link to the DPS PSP is provided to navigate to the PSP portal for additional options related to your Fingerprint Clearance Card.



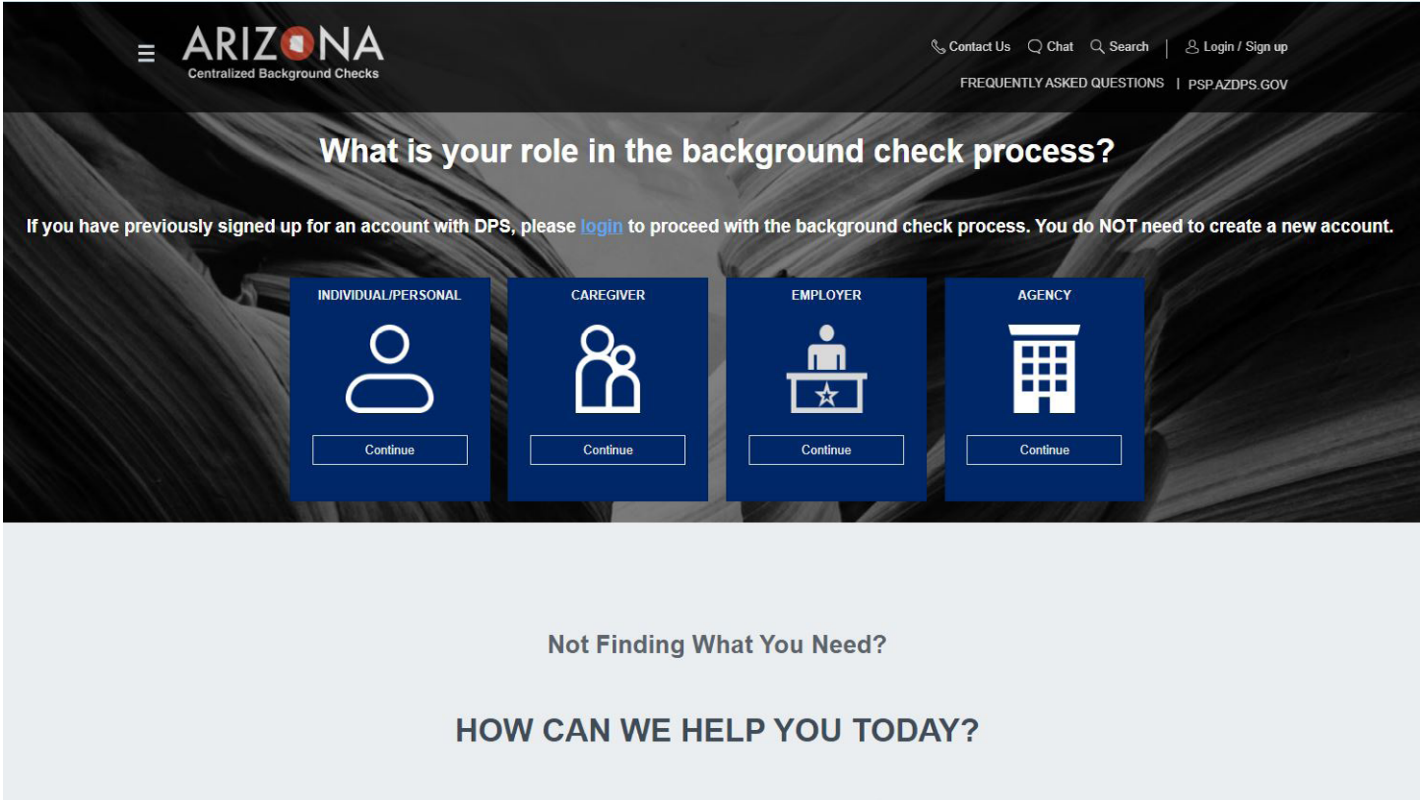


Figure 1. CBC Portal Landing and Sign up Page

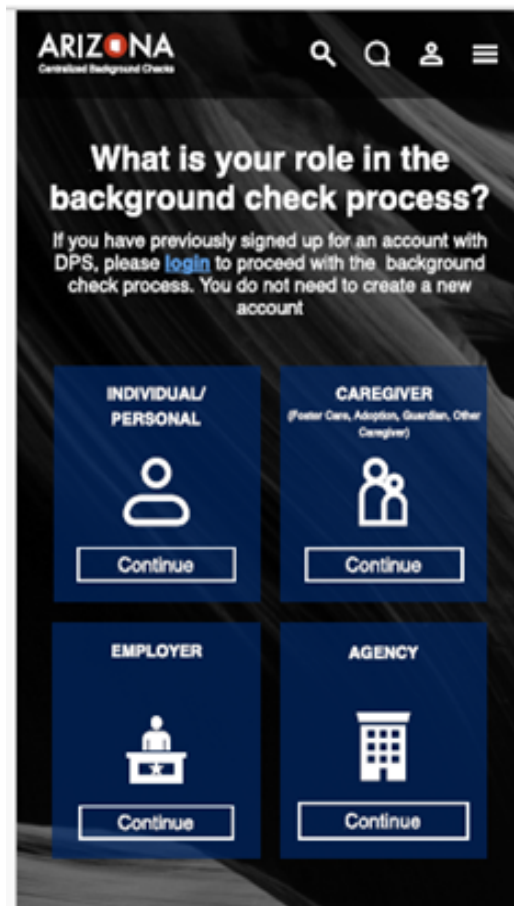


Figure 2. CBC Portal Landing Page - Mobile



# Create A CBC Account

Create an account from the CBC portal as follows:

- On the '[Profile Information](#)' page, enter the following and click 'Continue':
  - Your Legal First Name, Legal Last Name and Middle Initial. Enter your Legal First Name and Legal Last Name again to confirm.
  - If applicable, select a Suffix.
  - Enter and confirm your Date of Birth.
  - Enter and confirm your email address. This email address will be the username to login to the portal. Use your own personal email address.
  - Enter and confirm a password for your account. The password must contain a minimum of 8 and maximum of 20 characters with 1 uppercase, 1 lowercase, and 1 special character or number.
- On the '[Address](#)' page, enter the following and click 'Continue':
  - Your Physical Address: The location where you reside.
  - Home Number: Enter your primary phone number. This can be a mobile number.
  - Mobile Number: If you would like to receive the account verification code by text, enter a Mobile Number.
  - Mailing Address: If your mailing address is the same as your physical address, click the 'use same address as above' checkbox. Otherwise, enter your mailing address.
- On the '[Security Questions](#)' page:
  - Select 3 Security Questions
  - Enter an Answer for each Security Question.
  - Click 'Create Account'.
- Login to your email account and locate the CBC account confirmation email.
  - Click 'Confirm Account' in the email. **Note:** The email references 'The DPS Team' since the accounts are shared for both the DPS PSP and the CBC portal. **The 'Confirm Account' link loads the DPS PSP. If you have closed the CBC page, return at: [cbc.az.gov](http://cbc.az.gov) and click Login.**
  - On the CBC Create Account - 'Verify Your Email', click 'Login'.
  - Enter your email address and CBC password. Click 'Login'.

# Create an Account Page Examples

1 Profile Information      2 Address      3 Security Questions      4 Create Account

## Creating Your Account \*Indicates required field.

Legal First Name\*

Confirm Legal First Name\*

Middle Initial

Legal Last Name\*

Confirm Legal Last Name\*

Suffix ▼

Date of Birth\* 📅

MM/DD/YYYY

Confirm Date of Birth\* 📅

MM/DD/YYYY

Email\* 👁

example@email.com

Confirm Email\*

example@email.com

Password\* 👁

Minimum of 8 and maximum of 20 characters with 1 uppercase 1 lowercase and 1 special character or number

Cancel Continue

Figure 3. Create Account: Profile Page



Progress indicator: Profile Information (1), Address (2), Security Questions (3), Create Account (4).

### Physical Address

Address\*

Apt

Example: #0A

City\*

State\*  
Arizona

Zip code\*

To login you will be required to enter a code. If you would like to receive this code by text, please enter a mobile number.

Home Number\*

Mobile Number

Optional

### Mailing Address

Use same address as above

Address\*

Apt

Example: #0A

City\*

State\*  
Arizona

Zip code\*

Buttons: Cancel, Continue

Figure 4. Create Account: Address Page

Progress bar: Profile Information (checked), Address (checked), Security Questions (pencil icon), Create Account (4)

### Creating Your Account \*Indicates required field.

Security Question #1\* ▼

Answer\* 👁

Security Question #2\* ▼

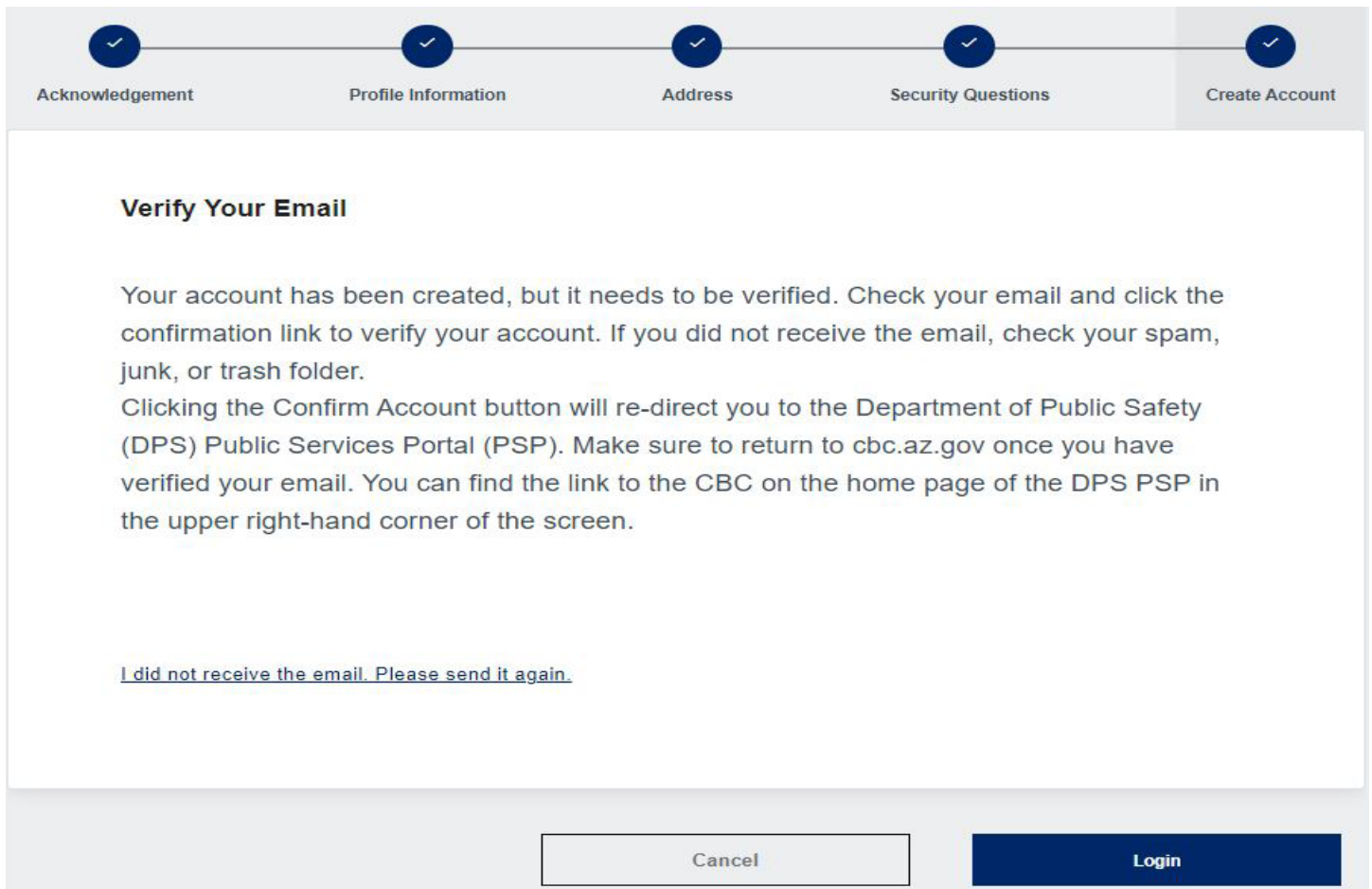
Answer\* 👁

Security Question #3\* ▼

Answer\* 👁

**Figure 5. Create Account: Security Questions Page**





**Figure 6. Create Account: Verify Your Email Page**

**AZ DPS- Account Confirmation**

<do\_not\_reply\_psptest2@azdps.gov>

Sunday, March 10, 2024 10:30:56 AM

Show pictures



**Account Confirmation**

Hi Test,

You have created an account with the following user name.

User Name: **cbctest@yopmail.com**

Please click the button below to confirm your account.

**Confirm Account**

If you did not make this request please **Contact Us**

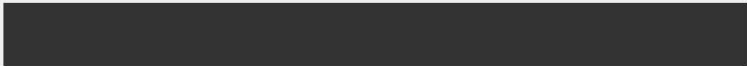
Thanks,  
**AZ DPS Team**

**AZ DPS - Your Account has been Unlocked**

<do\_not\_reply\_psptest2@azdps.gov>

Sunday, March 10, 2024 10:31:14 AM

Show pictures



**Account Unlocked**

Hi Test,

Please note that the account registered with the user name  
**cbctest@yopmail.com** has been unlocked.

If you did not make this request please **Contact Us**

Thanks

**Figure 7. Account Confirmation Email**

# Log In

Once you have created an account, the first time you login, the Services page presents so a new background check request can be started. For all subsequent logins, the Individual/Personal Dashboard presents.

To login, go to [cbc.az.gov](http://cbc.az.gov) and:

- Click the Login option in the upper right corner of the page.
- Enter your email address and CBC password.
- Select Text or Email to receive a On-Time Passcode (OTP) to verify your identity.
- Locate the text or email with the 6-digit code. If you did not receive the OTP, click 'resend OTP'. **Note:** The text and email reference AZ DPS since the CBC account is the same account as the DPS PSP.
- Enter the 6-digit code and click 'Login'.

# Log In Page Examples

## For Your Protection

\*Indicates required field.

For security, we need to verify your identity. Below are the email addresses and phone numbers you have listed with us.

Choose how you want to receive your temporary One-Time Passcode (OTP)\*

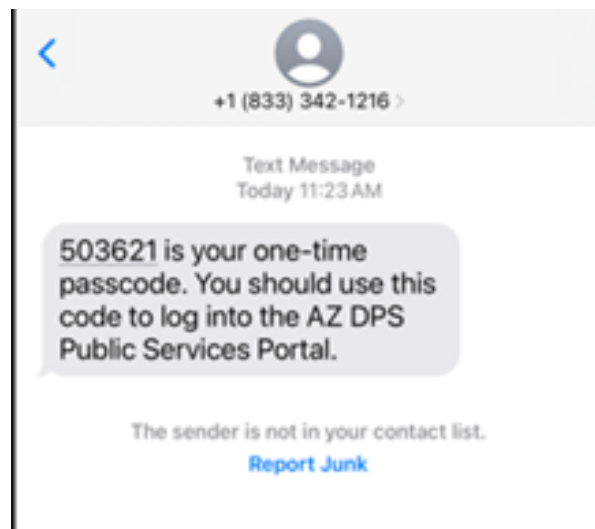
- Text    xxx-xxx-0000
- Email    c...t@yopmail.com

Cancel

Send OTP

**Figure 8. Request One Time Passcode (OTP)**





**Figure 9. Text - Request One Time Passcode (OTP)**

## Your Requested AZ DPS One-Time Passcode

 <do\_not\_reply\_psptest2@azdps.gov>

 Sunday, March 10, 2024 10:35:11 AM

413888 is your one-time passcode. You should use this code to log into the AZ DPS Public Services Portal.

Thank you  
AZ DPS Team

**Figure 10. Email - Request One Time Passcode**

## For Your Protection

\*Indicates required field.

We just sent you a One-Time Passcode (OTP). Please enter it below to verify your account.

One-Time Passcode (OTP)\*

\_\_\_\_\_

Cancel

Login

Did not receive the OTP. [Resend OTP.](#)

Figure 11. Enter One Time Passcode (OTP)

# Forgot Password

If you have forgotten your password and need it reset, you will need your security questions and answers. Then, go to [cbc.az.gov](http://cbc.az.gov) and:

- Click the Login/Sign Up option in the upper right corner of the page.
- Click '[Forgot Password](#)'.
- Enter your email address and click 'Continue'.
- Navigate to your email account, locate the [password reset email](#), and click the 'Reset Password' button.
- Enter the answers for the [security questions](#).
- Enter a [new password](#), confirm the password, and click 'Continue'. The password must contain a minimum of 8 and a maximum of 20 characters with 1 uppercase, 1 lowercase and 1 special character or number.
- Click the Login/Sign Up option in the upper right corner of the page.
- Enter your email address and the new password.
- Select Text or Email to receive a One-Time Passcode (OTP) to verify your identity.
- Locate the text or email with the 6-digit code. **Note:** The text and email reference AZ DPS since the CBC account is the same account as the DPS PSP.
- Enter the 6-digit code and click 'Login'.

## Forgot Password

\* Indicates required field.

Enter your email address below to reset your password:

Email Address\*

Cancel

Continue

Don't have an account? [It's easy to create one.](#)

**Figure 12. Forgot Password Page**

## Forgot Password

---

### Check Your Email

If the email address you entered is valid, a password reset link will be sent. Check your email and click the confirmation link to reset your password. If you did not receive the email, check your spam, junk, or trash folder.


[I did not receive the email. Please send again.](#)



**Figure 13. Check Your Email**



## AZ DPS - Password Reset

 <do\_not\_reply\_pspstest2@azdps.gov>

 Sunday, March 10, 2024 10:37:24 AM

 Show pictures

### Password Reset

Hi Test,

We received a request to reset the password for the **cbctest@yopmail.com** account that is associated with this email address.

If you made this request, please click the button below to securely reset your password.

[Reset Password](#)

If you did not make this request please **Contact Us**

Thanks,  
**AZ DPS Team**

Figure 14. Email for Password Reset

---

## Forgot Password

### Security Questions

\* Indicates required field.

Answer the security questions below to complete the password reset:

Security Question #1 \*

Who was your childhood hero?

---

Answer \* \*

---



Security Question #2 \*

What was your childhood nickname?

---

Answer \* \*

---



Security Question #3 \*

What was your dream job as a child?

---

Answer \* \*

---



Cancel

Submit

Figure 15. Security Questions

## Reset Password

\* Indicates required field.

Enter a new password to complete the password reset:

New Password \*



Minimum of 8 characters with 1 uppercase 1 lowercase and 1 special character or number. Your new password cannot match any of your last 10 passwords used

Confirm Password \*



Minimum of 8 and maximum of 20 characters with 1 uppercase 1 lowercase and 1 special character or number. Your new password cannot match any of your last 10 passwords used

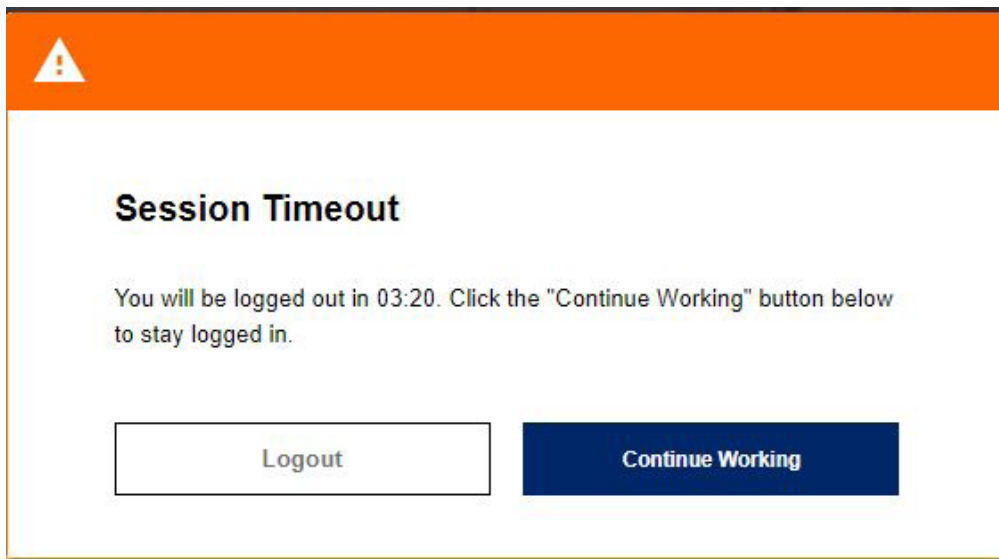
Cancel

Continue

Figure 16. Reset Password

# Session Timeout

For security reasons, the CBC will initiate a session Timeout countdown after 5 minutes of inactivity. The countdown will allow 5 minutes to click 'Continue Working'. When the countdown timer expires, the CBC will automatically logout.



**Figure 17. Session Timeout Popup**

# Employment Request

Submit an Employment background check request for the following:

- To gain employment
- To become a volunteer
- To complete annual background check reviews

Before starting a request, contact your Employer (*or potential employer*) for the following information:

- The email address of your Employer's CBC account.
- If you are affiliated with a Department of Economic Security (DES) service provider, you will need:
  - The DES Division name
  - The Solicitation Number, Contract Number, or Provider ID.
- Confirmation if a DPS Fingerprint Clearance Card (FCC) is required for the position.

To view the Employment background check request form in Spanish, click the 3 lines icon in the upper right corner of the page. Then, select 'Spanish' on the language menu.

## Create and Submit An Employment Request

After gathering the required employer information, login to the CBC and complete the following to create and submit an Employment Request:

- Click '[Requests](#)' in the upper right hand corner of the page.
- On the 'Employment' tile, click 'Continue'.
- On the [Employment Request Triage popup](#), enter the email address of your Employer's CBC account and click 'Continue'. **Note:** An error message will present if the email address entered does not match an existing CBC or DPS PSP employer account. Check the spelling and confirm with the employer that the email address is correct.
- If your FCC card is linked to your DPS PSP account, the CBC will retrieve the card information automatically. If you have not applied for an FCC card or have not linked it to your DPS PSP account, select 'Yes' for 'Is a Fingerprint Clearance Card (FCC) required for your employment?' question. After 'Yes' is selected, another popup presents.
  - Click the 'Continue to DPS PSP' option.
  - If you need to connect your FCC card or application to your DPS PSP account, go to [psp.azdps.gov](https://psp.azdps.gov) and complete the following:
    - Click 'Services' in the header.
    - Click the 'Fingerprint Clearance Card' tile.
    - For 'What action do you need to take?', select 'Apply for a card / Request a replacement' and click 'Continue'.
    - For 'Have you applied for a DPS Fingerprint Clearance Card in the past?', click 'Yes'.
    - Enter your FCC Application Number or Card Number and click 'Continue'.
    - For additional assistance regarding your FCC card, visit: DPS PSP Contact Us page - Fingerprint Clearance Cards (<https://psp.azdps.gov/home/contactus>)
  - Return to [cbc.az.gov](https://cbc.az.gov), login and click 'Services' in the upper right hand corner of the page.



- Complete the Acknowledgement, Your Information, Signature, and Form Review tabs on the Employment Request form. **Note:** To save and come back, click the 'Save' button at the bottom of any of the form pages. Your request will be moved to the [Draft Forms and Requests](#) section of your Dashboard.
  - [Acknowledgement](#)
    - Select the type of check you will be requesting.
      - Department of Child Safety (DCS) Check  
**Note:** When DCS is checked, the APS source is automatically included.
      - Arizona Adult Protective Services (APS) Check
  - Review the 'Purpose and Legal Authority'
    - Check the box 'I have read the statement above and agree to the terms therein.'
    - Click 'Continue'.
  - [Your Information:](#)
    - Background Check Information
      - Date Employed: If you've started working, enter the date employed. Otherwise, leave blank.
      - Fingerprint Clearance Card Application Number.
      - Solicitation/Contract Number or Provider ID.
    - Employer Information: This section automatically fills in the information related to your employer's CBC account.
    - Requester Information: Your First Name, Middle Name, Last Name, Suffix (if applicable), and Date of Birth automatically fills in the information from your account profile. Enter your Social Security Number.
    - Previous Names, AKA or Aliases: Select 'Yes' or 'No' for 'Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes' question. If 'Yes', enter the First Name, Middle Name, Last Name, Suffix (if applicable) for **each** previous name, AKA or alias.
      - Click 'Add additional maiden name, previous name, AKA or alias' to enter more names.
      - If you have more than 7 names, check the box for 'I have other names that have not yet been provided.' Then, list the first, middle, and last name of any other names not yet provided.
    - Address Information:
      - Select 'Yes' or 'No' for 'Do you have a Physical Address?'
        - If 'Yes', enter the physical address, apartment/building number, city, state, and zip code.
        - If 'No', enter mailing address, apartment/building number, city, state, and zip code. Also, type a response for 'What is the reason you do not have a physical address?'
      - Select 'Yes' or 'No' for 'Have you lived at your current address for five (5) years or longer?' If 'No', enter the address, apartment/building number, city, state, zip code, date from and date to for **each** address lived at in the last 5 years. Click 'Add additional residence to enter more addresses.
    - Additional information:
      - Select 'Yes' or 'No' for 'Are you currently the subject (not the victim) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction?' If 'Yes', enter the following:

- What was the allegation?
    - When was the allegation?
    - Where was the investigation? Provide the city and state.
  - Select 'Yes' or 'No' for 'Have you ever been the subject (not the victim) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding?' If 'Yes', enter the following:
    - What was the allegation?
    - When was the allegation?
    - Where was the investigation? Provide the city and state.
  - Click 'Add Investigation' to enter more investigations.
  - Enter other applicable information for 'If you wish to provide additional information please use the space provided'. For example, if you have additional addresses or investigations that exceed the form limits, enter the details here. Do NOT list additional names here. Enter additional names in the Previous Names, AKA or Aliases section.
- Click 'Continue'.
- **Signature:**
  - Click the checkbox for Applicant Signature. **Note:** A signature is not required for an APS registry check.
  - Type your name in the Signature line. The name must match the name on the account Profile (*including middle name or initial and suffix*). **Note:** If your name has changed, enter your new name as an alias.
  - Click 'Continue'.
    - **Review:** The review tab displays all of the form sections and the responses entered. Review the information to make sure it is accurate and complete.
    - To make edits, scroll to the top of the page and select the section in the progress bar (*Acknowledgement, Your Information, or Signature*).
    - Click 'Continue to My Order'.
- On the [My Order page](#)
  - Click 'Submit'. **Note:** If you are not ready to submit your request, click 'Save for Later' or you can click 'Delete' to delete the request.
  - Click the link for 'To view submitted requests or add additional employers to an employment request, navigate to your [dashboard](#).'

Once a background check request is submitted, you and your employer will receive a confirmation notice. Once submitted, the background check request cannot be changed. If the background check has not been completed, you may cancel the request and submit another request. To cancel a request, see [Dashboard - Employment Request](#). To correct a date of birth on your background check after it has been completed, you must email: [cbctechnicalsupport@azdes.gov](mailto:cbctechnicalsupport@azdes.gov).

# Annual Employment Requests

The CBC requires a new employment background check request with updated information to be submitted at least once a year. The CBC will generate notifications 90 days in advance of the expiration of the current background check request. If a new request is not submitted by the due date, the background check will expire, and notification will be sent to the Employer and any connected Agency accounts. To submit a new employment background check, see [Create and Submit an Employment Request](#).

When another request is created, the CBC brings forward the information entered on the previous request:

- Add any new 'Previous names, AKA or Aliases'. **Note:** Names added on prior requests cannot be removed.
- If an address entered on a prior request is no longer within the last 5 years, click 'Remove this residence'.

## DCS Central Registry Exception

A Department of Child Safety (DCS) Central Registry Exception may be requested by the individual through the Arizona Board of Fingerprinting (AzBOF). Additional information can be found at <https://fingerprint.az.gov>.

When an exception has been granted, the DCS record is typically updated within one week. To generate an updated background check result report after an exception has been granted, [create and submit a new employment request](#).

# Employment Request Page Examples

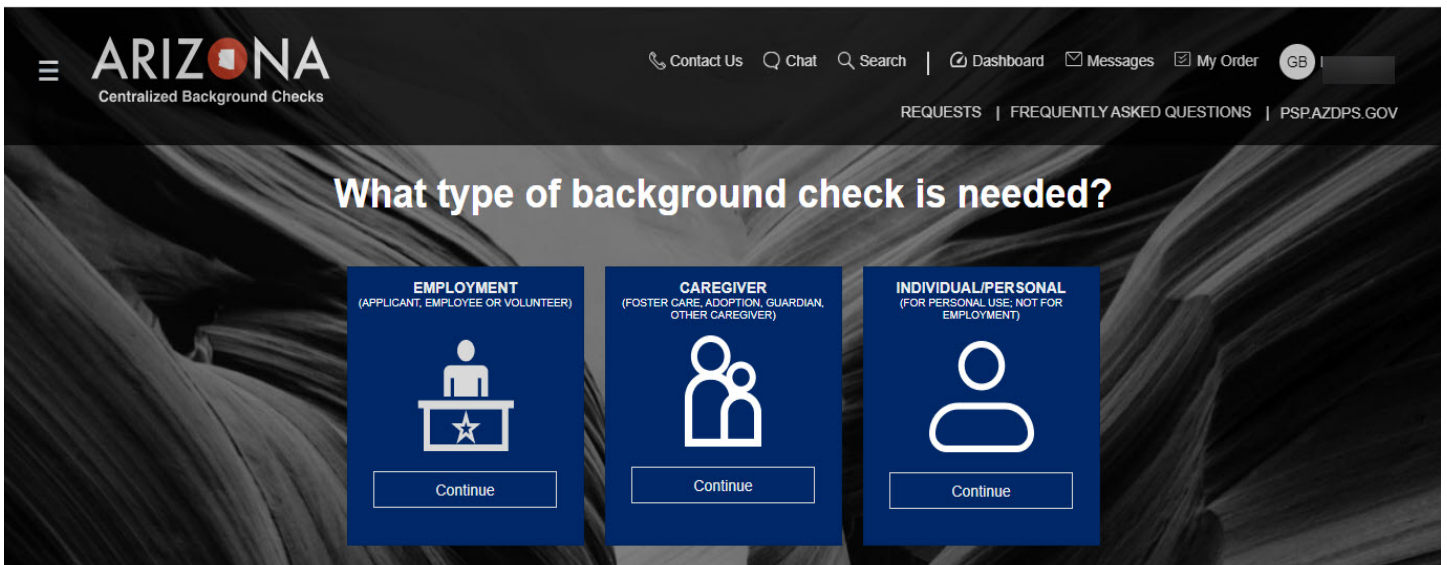


Figure 18. Requests Page

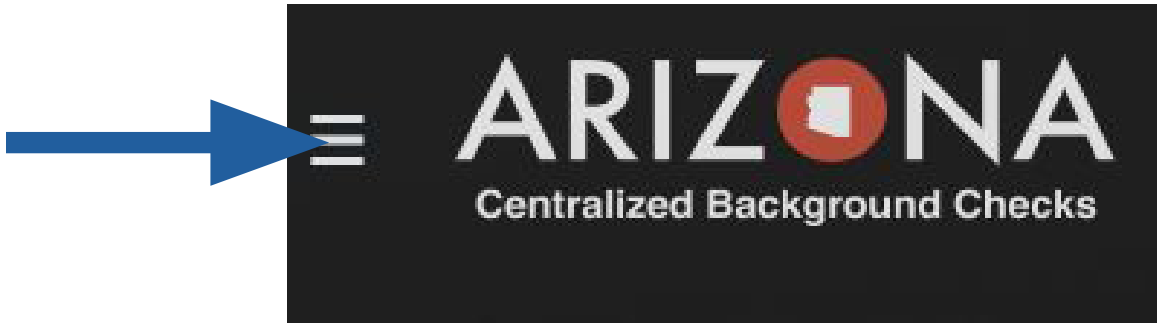


Figure 19. Language Menu Option

## Employment Background Check Request

\*Indicates required field.

---

Please enter the Employer's email address as registered with the Arizona Centralized Background Checks (CBC)

Enter employer's email\*

---

Cancel

Continue

**Figure 20. Employment Request Triage popup**



## Employment Background Check Request

\*Indicates required field.

Please enter the Employer's email address as registered with the Arizona Centralized Background Checks (CBC)

Enter employer's email\*

test@yopmail.com

Your employer does not have an account registered with the CBC under this email address. Please check the spelling of the email address and confirm with your employer that you have the correct email address.

Cancel

Continue

**Figure 21. Error: Employer Account Not Found**

Is a Fingerprint Clearance Card (FCC) required for your employment? Please confirm with your employer before continuing.



**Figure 22. Error: FCC Triage Popup**

Please continue to the Department of Public Safety (DPS) Public Services Portal (PSP) to apply for a Fingerprint Clearance Card or to link an existing card to your account.

Make sure to return to CBC.AZ.GOV once you have submitted the application or linked your fingerprint clearance card. You can find the link to the CBC on the home page of the DPS PSP in the upper right hand corner of the screen.

Cancel	Continue to DPS PSP
--------	---------------------

**Figure 23. Apply for FCC with DPS Popup**

Acknowledgement      Your Information      Signature      Review

---

### Request Type

---

What type of check will you be requesting? \*

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

### Purpose and Legal Authority

---

You are required to complete this request because you have applied for a position that requires a search of the Arizona Department of Child Safety's (DCS) Child Abuse and Neglect Records (CPS/CR) and a Level 1 Fingerprint Clearance Card issued by the Department of Public Safety (DPS). Both are required by Arizona state law. Your information, upon submission by your employer, will be searched through the DCS Central Registry for Employment, and the DCS and DPS Fingerprint Clearance Card databases. Refer to A.R.S. § 8-804 and 45 CFR § 98.43.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individual who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

Employers are encouraged to review the registry when deciding whether to employ to provide care for vulnerable populations. The decision to hire a person listed on the APS Registry is solely up to the employer.

I have read the statement(s) above and agree to the terms therein. \*

**Figure 24. Employment Request: Acknowledgement**

### Background Check Information



Date Employed

---

Solicitation/Contract Number or Provider ID \*

---

[Add Contract Numbers](#)

### Employer Information

Employer Name \*  
CBC Test Employer

---

Representative Name \*  
CBCEmployer CBCEmployer

---

Title \*  
HR

---

**Mailing Address**

Address \*  
123 Test Road

---

Suite

---

City \*  
Phoenix

---

State \*  
Arizona ▼



---

Zip \*  
85007

---

Phone Number \*  
(000)000-0000

## Requester Information

First Name *	
Test	
Middle Name *	<input type="checkbox"/> I do not have a middle name
Last Name *	
Test	
Suffix	▼
Date of Birth *	
1/1/1970	
Social Security Number *	
<input type="checkbox"/> I choose not to provide or I don't have one	

## Previous Names, AKAs or Aliases

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

Please enter any maiden names, previous names, AKAs or aliases

First Name *	
Middle Name *	<input type="checkbox"/> I do not have middle name
Last Name *	
Suffix	▼

[ADD NAME: Add maiden name, previous name, AKA or alias](#)

## Address Information

Do you have a Physical Address?

Yes  No

Physical Address \*

123 Test Road

---

Apt

---

City \*

Phoenix

---

State \*

Arizona 

---

Zip \*

85007

---

## Address Information

Do you have a Physical Address?

Yes  No

Mailing Address \*

---

Apt

---

City \*

---

State \*

---

Zip \*

---

What is the reason you do not have a physical address? \*



---



Have you lived at your current address for five (5) years or longer?

Yes  No

Please list five (5) years of your residence history.

Address *	
Apt	
City *	
Country *	USA ▼
State *	▼
Zip *	
Date From *	Date To *  

[Add additional residence](#)

## Additional Information

Are you currently the SUBJECT (NOT THE VICTIM) of an investigation of abuse or neglect of a child or vulnerable adult in Arizona, or another state or jurisdiction? \*

Yes  No

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of abuse or neglect of a child or vulnerable adult in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? \*

Yes  No

What was the allegation? \*

---

When was the investigation? \*

---

Where was the investigation? \*

---

Please provide the City and State

### [+Additional investigation](#)

If you wish to provide additional information please use the space provided.

---

Do NOT list additional names in this field

Cancel

Save

Continue

**Figure 25. Employment Request: Your Information**

Acknowledgement      Your Information      Signature      Review

## Signature

Applicant Signature

By signing this form, I allow the Department of Child Safety to report final findings of any DCS investigation of abuse of a child or vulnerable adult for the Employer listed in this request. I attest under penalty of perjury, that the information provided is true, correct, and complete to the best of my knowledge and belief. I further understand the provision of false information or intentional misrepresentation of information on this form may result in disciplinary action. \*

Signature \*

\_\_\_\_\_

Enter the First Name, Middle Initial, Last Name and Suffix as listed on your account profile. Do not enter special characters.

Cancel      Save      Continue

**Figure 26. Employment Request: Signature**

The screenshot shows a multi-step form interface. At the top, there is a progress bar with four steps: 'Acknowledgement' (checked), 'Your Information' (checked), 'Signature' (active), and 'Review' (unchecked). Below the progress bar, the 'Signature' section is titled 'Signature' and contains a red heart icon. A message box below the title reads: 'This information is not relevant for your type of request, please continue to the next page.' At the bottom of the form, there are three buttons: 'Cancel', 'Save', and 'Continue'.

**Figure 27. Employment Request: APS Only – No Signature Needed**

### Privacy Act Statement



### Request Type

What type of check will you be requesting? \*

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

### Purpose and Legal Authority

You are required to complete this request because you have applied for a position that requires a search of the Arizona Department of Child Safety's (DCS) Child Abuse and Neglect Records (CPS/CR) and a Level 1 Fingerprint Clearance Card issued by the Department of Public Safety (DPS). Both are required by Arizona state law. Your information, upon submission by your employer, will be searched through the DCS Central Registry for Employment, and the DCS and DPS Fingerprint Clearance Card databases. Refer to A.R.S. § 8-804 and 45 CFR § 98.43.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individual who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

Employers are encouraged to review the registry when deciding whether to employ to provide care for vulnerable populations. The decision to hire a person listed on the APS Registry is solely up to the employer.

I have read the statement(s) above and agree to the terms therein. \*

## Background Check Information

Date Employed

.....

Fingerprint Clearance Card Application Number

.....

Solicitation/Contract Number or Provider ID \*

123289

.....

## Employer Information

Employer Name \*

CBC Test Employer

Representative Name \*

CBCEmployer CBCEmployer

Title \*

HR

### Mailing Address

Address \*

123 Test Road

Suite

City \*

Phoenix

State \*

Arizona

Zip \*

85007

Phone Number \*

(000)000-0000

Employer Email \*

cbcemployer@yopmail.com

## Requester Information

---

First Name \*

Test

---

To change your legal name, please navigate to your account profile.

Middle Name \*

I do not have a middle name

Last Name \*

Test

---

Suffix

---



Date of Birth \*

1/1/1970

---



Social Security Number \*

---

I choose not to provide or I don't have one

## Previous Names, AKAs or Aliases

---

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

## Address Information

---

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

---

Apt

---

City \*

PHOENIX

---

State \*

Arizona

---



Zip \*

85007

---

Have you lived at your current address for five (5) years or longer? \*

Yes  No



Please list five (5) years of your residence history.

Address \*

1234 Test Road

Apt

City \*

Tucson

Country \*

USA

State \*

Arizona

Zip \*

85704

Date From \*

2/1/2024

Date To \*

3/22/2024

## Additional Information

Are you currently the SUBJECT (NOT THE VICTIM) of an investigation of abuse or neglect of a child or vulnerable adult in Arizona, or another state or jurisdiction? \*

Yes  No

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of abuse or neglect of a child or vulnerable adult in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? \*

Yes  No

What was the allegation? \*

test

When was the investigation? \*

test

Where was the investigation? \*

test

Please provide the City and State

If you wish to provide additional information please use the space provided.

test

Do NOT list additional names in this field

## Signature

**Applicant Signature**

By signing this form, I allow the Department of Child Safety to report final findings of any DCS investigation of abuse of a child or vulnerable adult for the Employer listed in this request. I attest under penalty of perjury, that the information provided is true, correct, and complete to the best of my knowledge and belief. I further understand the provision of false information or intentional misrepresentation of information on this form may result in disciplinary action. \*

**Signature \***

Test Test

.....

Enter the First Name, Middle Initial, Last Name and Suffix as listed on your account profile. Do not enter special characters.

**To make edits, scroll to the top of this page and select the section in the progress bar.**

Cancel

Save

Continue to My Order

**Figure 28. Employment Request: Review**

## My Order

### Background Check Requests

Item ↑

Item ↑

Employment Background Check Request

\$0.00

[Save for Later](#)

[Delete](#)

**Total**

**\$0.00**

**Submit**

**Figure 29. Employment Request: My Order Page**

# Caregiver Request

Submit a Caregiver background check request to become a **DCS** caregiver (*foster care, adoption, or guardian*).

Before starting a request, you will need:

- A completed CSO-3663 Affidavit for Individual/Caregiver Central Registry Request form ready to upload. The form must have a signature for every adult (*age 18 or older*) who lives in your home.
- English: [https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663\\_0.pdf](https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663_0.pdf)
- Spanish: [https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663S\\_0.pdf](https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663S_0.pdf)
- The email address of your Agency's CBC account.
- The following information for each adult (*age 18 or older*) who lives in your home:
  - Name
  - Date of Birth
  - Social Security Number
  - [Fingerprint Clearance card Application Number](#). If the person does not already have a card or an application for a card, they must apply at: [psp.azdps.gov](http://psp.azdps.gov)
  - Other names used

## Create and Submit A Caregiver Request

After completing the CSO-3663 Affidavit for Individual/Caregiver Central Registry Request form, login to the CBC and complete the following to create and submit a Caregiver Request:

- Click 'Requests' in the upper right hand corner of the page.
- On the 'Caregiver tile, click 'Continue'.
- On the Caregiver Request Triage popups
  - On Affidavit popup, click 'Continue'.
  - On the Agency Account popup, enter the email address for your Agency's CBC account and click 'Continue'. **Note:** An error message will display if the email address entered does not match an existing CBC or DPS PSP Agency account. Check the spelling and confirm with the employer that the email address is correct.
- Complete the Acknowledgement, Your Information, Household Members, Documents and Signature, and Review tabs on the Caregiver Request form.
  - [Acknowledgement](#)
    - Select the type of check you will be requesting.
      - Department of Child Safety (DCS) Check  
*Note:* When DCS is checked, the APS source is automatically included.
      - Arizona Adult Protective Services (APS) Check
    - Review the 'Purpose and Legal Authority'
    - Check the box 'I have read the statement above and agree to the terms therein'.
    - Click 'Continue'.
  - [Your Information:](#)
    - Agency/Employer Information: This section automatically fills in the information related to your agency's CBC account.
    - Your Information:
      - Enter your First Name, Middle Name, Last Name, Suffix (*if applicable*), Date of

- Birth, and Social Security Number.
  - Enter your Fingerprint Clearance Card or Application Number.
- Previous Names, AKA or Aliases: Select 'Yes' or 'No' for 'Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes' question. If 'Yes', enter the First Name, Middle Name, Last Name, Suffix (*if applicable*) for **each** previous name, AKA or alias.
  - Click 'Add additional maiden name, previous name, AKA or alias' to enter more names.
  - If you have more than 7 names, check the box for 'I have other names that have not yet been provided.' Then, list the first, middle, and last name of any other names not yet provided.
- Address Information:
  - Select 'Yes' or 'No' for 'Do you have a Physical Address?'
    - If 'Yes', enter the physical address, apartment/building number, city, state, and zip code.
    - If 'No', enter mailing address, apartment/building number, city, state, and zip code. Also, type a response for 'What is the reason you do not have a physical address?'
  - Select 'Yes' or 'No' for 'Have you lived at your current address for five (5) years or longer?' If 'No', enter the address, apartment/building number, city, state, zip code, date from and date to for **each** address lived at in the last 5 years. Click 'Add additional residence to enter more addresses.
- [Household Members](#):
  - Adult Household Members: Select 'Yes' or 'No' for 'Are there any other **adults** living in the home? Select 'Yes' if there are adults aged 18 or older living in the home. If 'Yes':
    - Enter the adult's First Name, Middle Name, Last Name, Suffix (*if applicable*), Date of Birth, Social Security Number, and [Fingerprint Clearance Card or Application Number](#).
    - If the adult has other names, click 'ADD NAME: Add maiden name, previous name, AKA or alias'.
      - Enter the First Name, Middle Name, Last Name, Suffix (*if applicable*).
      - Click 'ADD NAME: Add maiden name, previous name, AKA or alias' to enter more names.
      - If you have more than 7 names, check the box for 'I have other names that have not yet been provided.' Then, list the first, middle, and last name of any other names not yet provided.
    - Click 'ADD ADULT' to enter the information for each additional adult living in the home.
  - Child Household Members: Select 'Yes' or 'No' for 'Are there any other children living in the home, including birth, adopted and any other minor children? If 'Yes', enter the child's First Name, Middle Name, Last Name, Suffix (*if applicable*), and Date of Birth.
  - Additional information: Enter other applicable information for 'If you wish to provide additional information please use the space provided'. For example, if you have additional addresses or investigations that exceed the form limits, enter the details here. Do NOT list additional names here. Enter additional names in the Previous Names, AKA or Aliases section.
  - Click 'Continue'.
- [Documents and Signature](#):
  - In the Documents section, click 'Upload'.

- In the 'Upload Document' popup:
  - In the 'Document Type' field, select 'Affidavit for Individual or Caregiver Central Registry Request'.
  - Click 'Choose File', locate the Affidavit form on your computer and click 'Open'.
  - Click the 'Upload' button.
- Click the checkbox for Applicant Signature and click 'Continue'.
- **Review:** The review tab displays all of the form sections and the responses entered. Review the information to make sure it is accurate and complete.
  - To make edits, scroll to the top of the page and select the section in the progress bar (*Acknowledgement, Your Information, Household Members, or Documents and Signature*).
  - Click 'Continue to My Order'.
- On the My Order page
  - Click 'Submit'. **Note:** If you are not ready to submit your request, click 'Save for Later'.
  - Click the link for 'To view submitted requests or add additional employers to an employment request, navigate to your dashboard.'

Once a background check request is submitted, you and your caregiver agency will receive a confirmation notice. Once submitted, the background check request cannot be changed. If the background check has not been completed, you may cancel the request and submit another request. To cancel a request, see [Dashboard Caregiver Request](#). To correct a date of birth on your background check after it has been completed, you must email: [cbctechnicalsupport@azdes.gov](mailto:cbctechnicalsupport@azdes.gov).

If there has been a change in household members, and a Caregiver request is pending, cancel the pending request and submit a new request with the added/removed household member(s). If a Caregiver request has been completed, submit a new request with the added/removed household member(s).

# Caregiver Request Page Examples

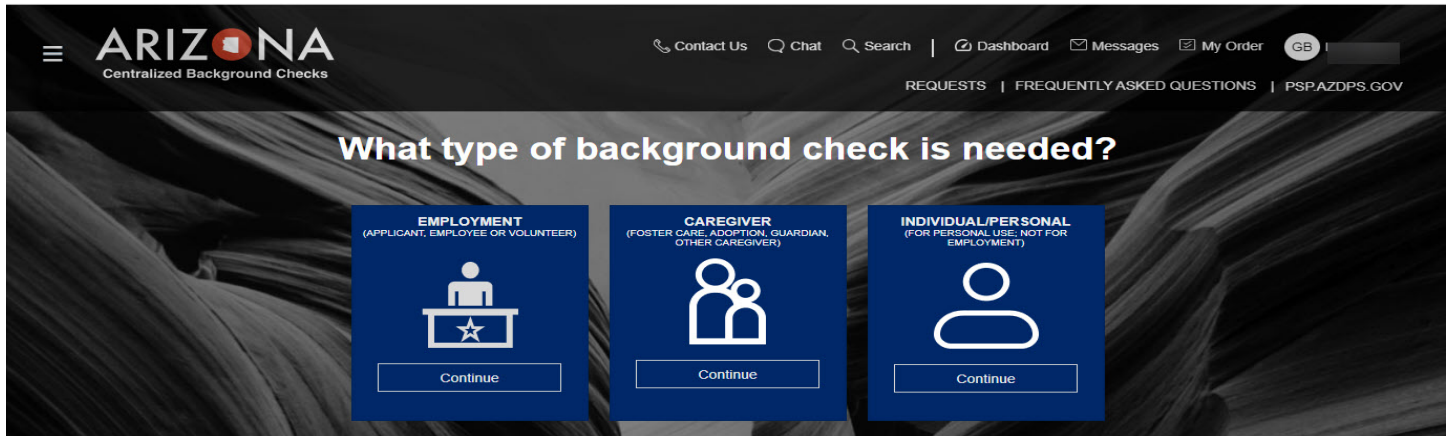


Figure 30. Requests Page



If you will be completing a check of the DCS Central Registry, then you will need to upload a notarized copy of the Affidavit for Individual or Caregiver Central Registry Request with your background check request. If you have not completed the Affidavit and had it notarized, please do so before starting the request. You may download the Affidavit form [here](#)

Para obtener la versión de Español de la declaración jurada, [opríma aquí](#)

Cancel	Continue
--------	----------

**Figure 31. Caregiver Request Triage: Affidavit Form Required**

Please enter the Agency's email address as registered with the Arizona Centralized Background Checks (CBC)

Enter agency's email\*

---

Cancel

Continue

**Figure 32. Caregiver Request Triage: Agency Account Email**

Please enter the Agency's email address as registered with the  
Arizona Centralized Background Checks (CBC)

Enter agency's email\*

test@yopmail.com

Your agency does not have an account registered with the CBC under this email address. Please check the spelling of the email address and confirm with your agency that you have the correct email address.

Cancel

Continue

**Figure 33. Error: Agency Account Not Found**

You will need to provide the Fingerprint Clearance Card (FCC) Number or FCC Application Number for **ALL adult** household members. To apply for an FCC, click Apply for an FCC. If you already have an FCC application or card for each adult household member, please have the numbers handy before continuing.



**Figure 34. FCC Required for All Adults**

Please continue to the Department of Public Safety (DPS) Public Services Portal (PSP) to apply for a Fingerprint Clearance Card or to link an existing card to your account.

Make sure to return to [CBC.AZ.GOV](http://CBC.AZ.GOV) once you have submitted the application or linked your fingerprint clearance card. You can find the link to the CBC on the home page of the DPS PSP in the upper right hand corner of the screen.

Cancel	Continue to DPS PSP
--------	---------------------

**Figure 35. Continue to DPS PSP for FCC**

Acknowledgement      Your Information      Household Members      Documents and Signature      Review

### Request Type

---

This request form is for Caregivers (example: Foster Care, Adoption, Guardian, Other Caregiver)

**What type of check will you be requesting? \***

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

### Purpose and Legal Authority

---

Department of Child Safety (DCS) records are confidential and can be released only to those individuals permitted by state (A.R.S. § 8-807) and federal law. This request is to be completed for all household members and requested information will be used to check the Child Safety Central Registry for any history of prior reports.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

I have read the statement(s) above and agree to the terms therein. \*

**Figure 36. Caregiver Request: Acknowledgement**



Acknowledgement



Your Information



Household Members



Documents and Signature



Review

## Agency/Employer Information



Agency/Employer Name \*

CBC Test Employer

Representative Name \*

CBCEmployer CBCEmployer

Title \*

HR

### Mailing Address

Address \*

123 Test Road

Suite

City \*

Phoenix

State \*

Arizona

Zip \*

85007




Phone Number \*

(000)000-0000

Agency/Employer Email \*

cbcemployer@yopmail.com

## Requester Information

First Name *	
Test	
Middle Name *	<input type="checkbox"/> I do not have a middle name
Last Name *	
Test	
Suffix	
Date of Birth *	
1/1/1970	
Social Security Number *	
<input type="checkbox"/> I choose not to provide or I don't have one	
Fingerprint Clearance Card or Application Number *	



## Previous Names, AKAs or Aliases

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

Please enter any maiden names, previous names, AKAs or aliases

First Name \*

---

Middle Name \*

---

I do not have middle name

Last Name \*

---

Suffix

---



[ADD NAME: Add maiden name, previous name, AKA or alias](#)

## Household Address

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

Apt

City \*

PHOENIX

State \*

Arizona

Zip \*

85007

Have you lived at your current address for five (5) years or longer?

Yes  No

Cancel

Save

Continue

## Household Address

---

Do you have a Physical Address?

Yes  No

Mailing Address \*

---

Apt

---

City \*

---

State \*

---



Zip \*

---

What is the reason you do not have a physical address? \*

---

Have you lived at your current address for five (5) years or longer?

Yes  No

Have you lived at your current address for five (5) years or longer?

Yes  No

Please list five (5) years of your residence history.

Address \*

---


Apt

---

City \*

---

Country \*

USA 



---

State \*

---

Zip \*

---

Date From \*  Date To \* 

---

[Add additional residence](#)

Cancel Save Continue

**Figure 37. Caregiver Request: Your Information**

Acknowledgement    Your Information    Household Members    Documents and Signature    Review

---

### Adult Household Members

---

Are there any other adults living in the home? \*

Yes  No

---

### Child Household Members

---

Are there any other children living in the home, including birth, adopted and any other minor children? \*

Yes  No

---

### Additional Information

---

If you wish to provide additional information please use the space provided

---

## Adult Household Members



Are there any other adults living in the home? \*

Yes  No

Please provide all of the adult household members

First Name \*

---

Middle Name \*

---

I do not have a middle name

Last Name \*

---

Suffix

---



Date of Birth \*

---



Social Security Number \*

---



I choose not to provide or I don't have one

Fingerprint Clearance Card or Application Number \*

Does this person have any additional maiden names, previous names, AKAs or aliases? \*

Yes  No

First Name \*

\_\_\_\_\_

Middle Name \*

\_\_\_\_\_

I do not have a middle name

Last Name \*

\_\_\_\_\_

Suffix

\_\_\_\_\_ ▼

[ADD NAME: add maiden name, previous name, AKA or alias](#)

[ADD ADULT](#)

## Child Household Members

Are there any other children living in the home, including birth, adopted and any other minor children? \*

Yes  No

Please provide all of the children in the home. Adult children living in the home must be listed as an Other Adult above.

First Name \*

\_\_\_\_\_

Middle Name \*

\_\_\_\_\_

I do not have a middle name

Last Name \*

\_\_\_\_\_

Suffix

\_\_\_\_\_ ▼

Date of Birth \*

\_\_\_\_\_ 📅

[ADD CHILD](#)

## Additional Information

If you wish to provide additional information please use the space provided

\_\_\_\_\_

Cancel

Save

Continue

Figure 38. Caregiver Request: Documents and Signature



Acknowledgement    Your Information    Household Members    Documents and Signature    Review

### Documents

You must provide a copy of the Affidavit for Individual or Caregiver Central Registry Request

**Upload**

### Applicant Signature

I certify that all information provided is true and accurate to the best of my knowledge. By signing this document, I give permission to the states mentioned above to conduct a search of their Central Registry for Abuse/Neglect records and to release any and all information in its entirety to the Arizona Department of Child Safety. \*


Signature \*

Enter the First Name, Middle Initial, Last Name and Suffix as listed on your account profile. Do not enter special characters.

**Cancel**    **Save**    **Continue**

**Figure 39. Caregiver Request: Documents and Signature**

Acknowledgement    Your Information    Household Members    Documents and Signature    Review

**Applicant Signature** 

This information is not relevant for your type of request, please continue to the next page.

Cancel    Save    Continue

**Figure 40. Caregiver Request: APS Only – No Signature Needed**



# Upload screen

Document Type\*

Affidavit for Individual or Caregiver Central Registry Request



Choose File

Choose a Document to Upload

The following document type extensions may be uploaded  
.jpg, .pdf, .xls, .xlsx, .png

Total size limit is 5 MB. 5 MB remaining.

Cancel

Upload

**Figure 41. Caregiver Request: Upload Popup**



Acknowledgement



Your Information



Household Members



Documents and Signature



Review

## Request Type



This request form is for Caregivers (example: Foster Care, Adoption, Guardian, Other Caregiver)

What type of check will you be requesting? \*

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

## Purpose and Legal Authority

Department of Child Safety (DCS) records are confidential and can be released only to those individuals permitted by state (A.R.S. § 8-807) and federal law. This request is to be completed for all household members and requested information will be used to check the Child Safety Central Registry for any history of prior reports.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

- I have read the statement(s) above and agree to the terms therein. \*

## Agency/Employer Information

Agency/Employer Name \*

CBC Test Employer

Representative Name \*

CBCEmployer CBCEmployer

Title \*

HR

### Mailing Address

Address \*

123 Test Road

Suite

City \*

Phoenix

State \*



Zip \*

85007


Phone Number \*

(000)000-0000

Agency/Employer Email \*

cbcemployer@yopmail.com

## Requester Information

First Name *	
Test	
Middle Name *	<input checked="" type="checkbox"/> I do not have a middle name
Last Name *	
Test	
Suffix	▼
Date of Birth *	
1/1/1970	
Social Security Number *	
<input checked="" type="checkbox"/> I choose not to provide or I don't have one	
Fingerprint Clearance Card Application Number *	
123589	

## Previous Names, AKAs or Aliases

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

## Household Address

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

Apt

City \*

PHOENIX

State \*

Arizona

Zip \*

85007

Have you lived at your current address for five (5) years or longer?

Yes  No

## Adult Household Members

Are there any other adults living in the home? \*

Yes  No

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

Apt

City \*

PHOENIX

State \*

Arizona

Zip \*

85007

Please list five (5) years of your residence history.

Address \*

1234 Test Road

Apt

City \*

Tucson

Country \*

USA

State \*

Arizona

Zip \*

85704

Date From \*

2/1/2024

Date To \*

3/22/2024



## Adult Household Members

Are there any other adults living in the home? \*

Yes  No

Please provide all of the adult household members

First Name \*

John

Middle Name

I do not have a middle name

Last Name \*

Test

Suffix

Date of Birth \*

1/1/1970

Social Security Number

## Child Household Members

Are there any other children living in the home, including birth, adopted and any other minor children? \*

Yes  No

Please provide all of the children in the home. Adult children living in the home must be listed as an Other Adult above.

First Name \*

Jane

Middle Name

I do not have a middle name

## Additional Information

If you wish to provide additional information please use the space provided

## Documents

**You must provide a copy of the Affidavit for Individual or Caregiver Central Registry Request**

File Name: CSO-3663\_0 (1).pdf

Document Type: Affidavit for Individual or Caregiver Central  
Registry Request

## Applicant Signature

I certify that all information provided is true and accurate to the best of my knowledge. By signing this document, I give permission to the states mentioned above to conduct a search of their Central Registry for Abuse/Neglect records and to release any and all information in its entirety to the Arizona Department of Child Safety. \*

Signature \*

Test Test

Enter the First Name, Middle Initial, Last Name and Suffix as listed on your account profile. Do not enter special characters.

To make edits, scroll to the top of this page and select the section in the progress bar.

Cancel

Save

Continue to My Order

**Figure 42. Caregiver Request: Review**

## My Order

### Background Check Requests

Item ↑

Item ↑

Caregiver Background Check Request

\$0.00

[Save for Later](#)

[Delete](#)

Total

\$0.00

Submit

Figure 43. Caregiver Request: My Order Page

# Locate FCC Card or Application for Caregiver Request

A Fingerprint Clearance Card (FCC) Card or Application Number is required to be entered on a Caregiver request for each adult household member aged 18 or older living in the home. If anyone has not applied for an FCC, proceed to [psp.azdps.gov](http://psp.azdps.gov) and apply. If any adult household member has applied for a card, but does not know the application number,

- The person can login to their DPS PSP account at: [psp.azdps.gov](http://psp.azdps.gov). Click 'Dashboard' in the upper right header. Then, the 'My Fingerprint Clearance Card Applications and Requests' section will display both the card number and application number.
- If the person has a card, but does not know the card number::
  - Go to: [psp.azdps.gov](http://psp.azdps.gov)
    - Click 'Continue' on the 'Fingerprint Clearance Card' tile.
    - Click 'Check the Status of the Card' and click 'Continue'.
    - Select 'Fingerprint Clearance Card Number' in the 'Enter your Search Criteria' field and click 'Search'. The search results will display both card number and application number.

# Locate FCC or Card Application Number Page Examples



**STATE OF ARIZONA**  
**DEPARTMENT OF PUBLIC SAFETY**  
Level One Fingerprint Clearance Card

**Name:** AZTESTEEEEEE A. AZTESTEEEEEE

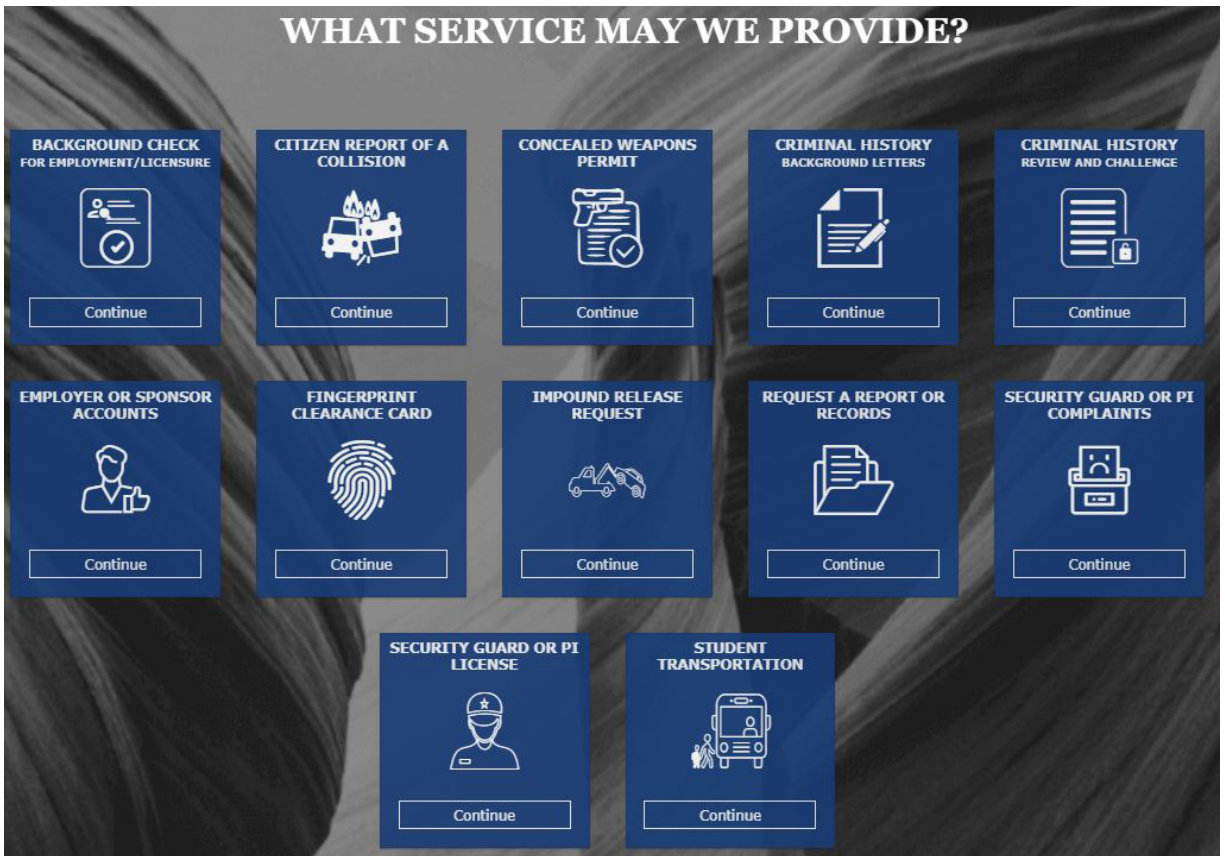
**Birth Date:** 11/1/1991      **Issue Date:** 11/1/2016

M	190	6 00	BLK	GRY
<b>Sex</b>	<b>Weight</b>	<b>Height</b>	<b>Eyes</b>	<b>Hair</b>

**Card Number:** 4A01780029      **Expire Date:** 11/1/2022

IVPE007108

Figure 44. FCC Application Number and Card Number



**Figure 45. PSP Services**

## What action do you need to take?



Apply for a Card / Request a Replacement



Check the Status of the Card



Connect with My Employer's Account

Cancel

Continue

Figure 46. PSP Actions

## Enter Your Search Criteria

---

Search by \*

**Fingerprint Clearance Card Number**

---



Enter Card Number \*

---

Cancel

Search

**Figure 47. PSP FCC Search Criteria**



Search Criteria	
Fingerprint Clearance	Card Number
	2023P01481

Search Results	
Application Number	P123456792
First Name	PATRICIA ELIZABETH
Last Name	TESTER
Card Type	Level One
Date Received	03/30/2023
Status	Valid

Figure 48. PSP Search by FCC Card Number

# Individual/Personal Request

Submit a Personal background check request only to check if you, as an individual, need to know if you are on the DCS Central Registry.

Before starting a request, you will need a signed and notarized CSO-3663 Affidavit for Individual/Caregiver Central Registry Request form ready to upload.

English: [https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663\\_0.pdf](https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663_0.pdf)

Spanish: [https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663S\\_0.pdf](https://dcs.az.gov/sites/default/files/DCS-Forms/CSO-3663S_0.pdf)

## Create and Submit A Personal Request

After completing and notarizing the CSO-3663 Affidavit for Individual/Caregiver Central Registry Request form, login to the CBC and complete the following to create and submit a Personal Request:

- Click [‘Requests’](#) in the upper right hand corner of the page.
- On the ‘Personal’ tile, click ‘Continue’.
- On the [Personal Request Triage](#) popup, click ‘Continue’.
- Complete the Acknowledgement, Requester Information, Documents and Signature, and Review tabs on the Personal Request form:
  - [Acknowledgement](#):
    - Select the type of check you will be requesting.
      - Department of Child Safety (DCS) Check  
**Note:** When DCS is checked, the APS source is automatically included.
      - Arizona Adult Protective Services (APS) Check
    - Review the ‘Purpose and Legal Authority’
    - Check the box ‘I have read the statement above and agree to the terms therein.’
    - Click ‘Continue’.
  - [Requester Information](#):
    - Requester Information: Enter your First Name, Middle Name, Last Name, Suffix (if applicable), Date of Birth, and Social Security Number.
    - Previous Names, AKA or Aliases: Select ‘Yes’ or ‘No’ for ‘Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes’ question. If ‘Yes’, enter the First Name, Middle Name, Last Name, Suffix (*if applicable*) for **each** previous name, AKA or alias.
      - Click ‘Add additional maiden name, previous name, AKA or alias’ to enter more names.
      - If you have more than 10 names, check the box for ‘I have other names that have not yet been provided.’ Then, list the first, middle, and last name of any other names not yet provided.
    - Address Information:
      - Select ‘Yes’ or ‘No’ for ‘Do you have a Physical Address?’
        - If ‘Yes’, enter the physical address, apartment/building number, city, state, and zip code.
        - If ‘No’, enter mailing address, apartment/building number, city, state, and zip code. Also, type a response for ‘What is the reason you do not have a physical address?’



# Personal Request Page Examples

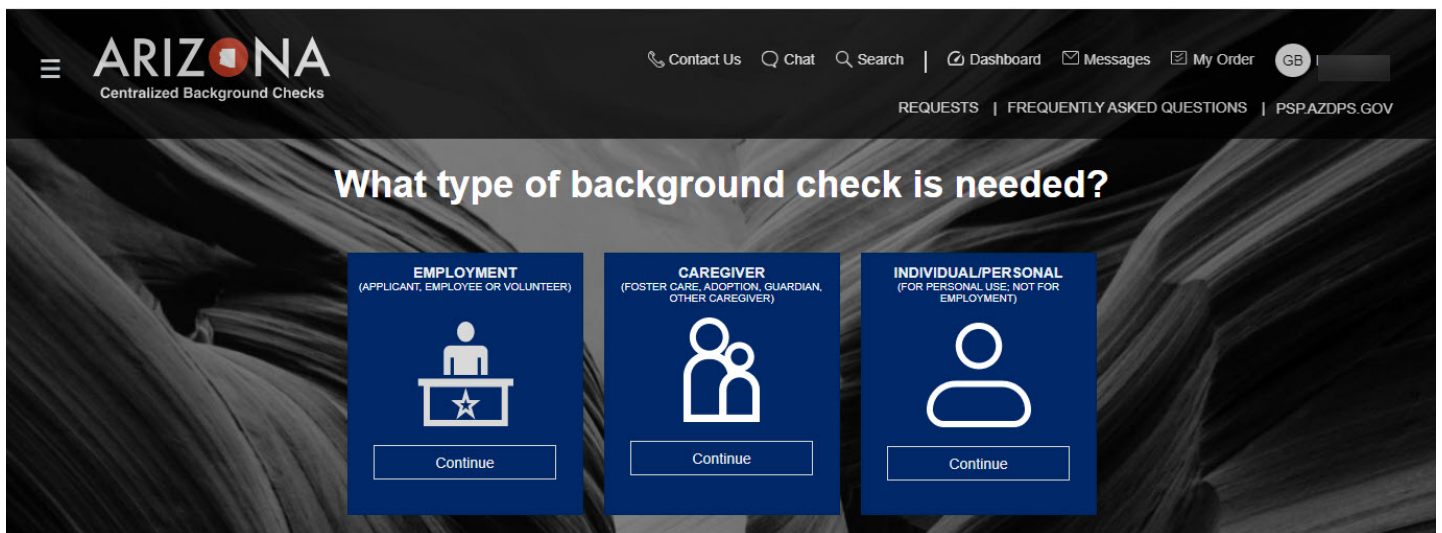


Figure 49. Requests Page

If you will be completing a check of the DCS Central Registry, then you will need to upload a notarized copy of the Affidavit for Individual or Caregiver Central Registry Request with your background check request. If you have not completed the Affidavit and had it notarized, please do so before starting the request. You may download the Affidavit form [here](#).

Para obtener la versión de Español de la declaración jurada, [oprima aquí](#)

Cancel

Continue

**Figure 50. Personal Request Triage**

Acknowledgement      Your Information      Documents and Signature      Review

---

### Request Type

What type of check will you be requesting? \*

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

### Purpose and Legal Authority

Department of Child Safety (DCS) records are confidential and can be released only to those individuals permitted by state (A.R.S. § 8-807) and federal law. This request may be completed by individuals who need to know if they are on the DCS Central Registry. Note: The result of the request will only show if there is or is not a substantiated report on the DCS Central Registry.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

I have read the statement(s) above and agree to the terms therein. \*

**Figure 51. Personal Request Acknowledgement**

### Requester Information



First Name \*  
Test

Middle Name \*  I do not have a middle name

Last Name \*  
Test

Suffix ▼

Date of Birth \*  
1/1/1970

Social Security Number \*

I choose not to provide or I don't have one

### Previous Names, AKAs or Aliases

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

Please enter any maiden names, previous names, AKAs or aliases

First Name \*

Middle Name \*  I do not have middle name

Last Name \*

Suffix ▼

[ADD NAME: Add maiden name, previous name, AKA or alias](#)

### Address Information

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

---

Apt


---

City \*

PHOENIX

---

State \*

Arizona 

---

Zip \*

85007

---

Have you lived at your current address for five (5) years or longer?

Yes  No

### Address Information

Do you have a Physical Address?

Yes  No

Mailing Address \*

---

Apt

---

City \*

---

State \*

---

Zip \*

---

What is the reason you do not have a physical address? \*

---

Have you lived at your current address for five (5) years or longer?

Yes  No



Please list five (5) years of your residence history.

Address *	
Apt	
City *	
Country *	USA ▼
State *	▼
Zip *	
Date From *	Date To *

[Add additional residence](#)

### Additional Information

If you wish to provide additional information please use the space provided.

---

Do NOT list additional names in this field.

Cancel

Save

Continue

**Figure 52. Personal Request Acknowledgement**

✓ Acknowledgement
 ✓ Your Information
  Documents and Signature
  Review

---

**Document**

---

**You must provide a copy of the Affidavit for Individual or Caregiver Central Registry Request**

File Name: CSO-3663\_0.pdf

**Upload**

---

**Applicant Signature**

---

Applicant Signature

I hereby certify under penalties of perjury that the answers given above are true and correct to the best of my knowledge and belief. By signing this document, I give permission to the states mentioned above to conduct a search of their Central Registry for Abuse/Neglect records and to release any and all information in its entirety to the Arizona Department of Child Safety.

Signature \*

Test Test

---

Cancel
Save
**Continue**

**Figure 53. Personal Request: Documents and Signature**



# Upload screen

Document Type\*

Affidavit for Individual or Caregiver Central Registry Request



[Choose File](#)

Choose a Document to Upload

The following document type extensions may be uploaded  
.jpg, .pdf, .xls, .xlsx, .png

Total size limit is 5 MB. 5 MB remaining.

Cancel

Upload

**Figure 54. Personal Request: Upload Popup**

The screenshot shows a four-step progress bar at the top: 'Acknowledgement' (checked), 'Your Information' (checked), 'Documents and Signature' (active), and 'Review' (empty). Below the progress bar is a white box with the title 'Document and Signature' and a red heart icon. A message box contains the text: 'This information is not relevant for your type of request, please continue to the next page.' At the bottom are three buttons: 'Cancel', 'Save', and 'Continue'.

**Figure 55. Personal Request: APS Only – No Signature Needed**

✓ Acknowledgement      ✓ Your Information      ✓ Documents and Signature      ✓ Review

---

### Request Type

---

What type of check will you be requesting? \*

- Department of Child Safety (DCS) Check
- Arizona Adult Protective Services (APS) Check

### Purpose and Legal Authority

---


Department of Child Safety (DCS) records are confidential and can be released only to those individuals permitted by state (A.R.S. § 8-807) and federal law. This request may be completed by individuals who need to know if they are on the DCS Central Registry. Note: The result of the request will only show if there is or is not a substantiated report on the DCS Central Registry.

The Arizona Adult Protective Services (APS) registry contains the name and date of birth of the person determined to have abused, neglected or exploited a vulnerable adult and the description of the allegation made. The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

I have read the statement(s) above and agree to the terms therein. \*

## Requester Information

---

First Name *	
Test	
.....	
Middle Name *	<input checked="" type="checkbox"/> I do not have a middle name
.....	
Last Name *	
Test	
.....	
Suffix	▼
.....	
Date of Birth *	
1/1/1970	
.....	
Social Security Number *	
.....	
<input checked="" type="checkbox"/> I choose not to provide or I don't have one	

## Previous Names, AKAs or Aliases

---

Do you have any additional maiden names, previous names, AKAs or aliases including any recent name changes? \*

Yes  No

## Address Information

---

Do you have a Physical Address?

Yes  No

Physical Address \*

134 Test Road

---

Apt

---

City \*

PHOENIX

---

State \*

Arizona

---

Zip \*

85007

---

Have you lived at your current address for five (5) years or longer?

Yes  No

## Additional Information

---

If you wish to provide additional information please use the space provided.

---

Do NOT list additional names in this field.

### Document ♥

---

**You must provide a copy of the Affidavit for Individual or Caregiver Central Registry Request**

File Name: CSO-3663\_0 (1).pdf ✕ Upload

### Applicant Signature

---

Applicant Signature

I hereby certify under penalties of perjury that the answers given above are true and correct to the best of my knowledge and belief. By signing this document, I give permission to the states mentioned above to conduct a search of their Central Registry for Abuse/Neglect records and to release any and all information in its entirety to the Arizona Department of Child Safety. \*

Signature \*

---

Enter the First Name, Middle Initial, Last Name and Suffix as listed on your account profile. Do not enter special characters.

CancelSaveContinue

**Figure 56. Personal Request: Review**



## My Order

### Background Check Requests

Item ↑

Item ↑

Personal Background Check Request

\$0.00

[Save for Later](#)

[Delete](#)

Total

\$0.00

Submit

Figure 57. Personal Request: My Order Page

# Dashboard

Login to the CBC and click 'Dashboard' in the upper right header. The Dashboard has the following sections:

- Recent Notifications
- Draft Forms and Requests
- My Employment Requests
- My Caregiver Requests
- My Personal Requests
- My Fingerprint Clearance Card Applications and Requests

The Dashboard also includes the following menu options on the left:

- My Activity: Displays the dashboard sections where a request has been submitted.
- Message Center: Displays the inbox for CBC notifications.
- My Favorites: Displays requests where the heart icon in the upper right corner of the form was clicked.

## Dashboard: Recent Notifications

Individuals will receive the following automated notifications:

- Request submission confirmation
- Request cancelation confirmation
- Request returned for corrections
- Result report

The following additional notifications are sent for Employment requests:

- Annual employment registry check due or has expired
- Employment request expired due to name change

When the CBC generates a notification, an email is sent to the email address listed on the account to indicate a new message is available. The 'Recent Notifications' section of the Dashboard displays the **unread** messages generated by the CBC. This section includes a:

- Link to the Message Center to view all messages.
- List of unread messages and the following details:
  - Date: The date the CBC generated the notification.
  - From: arizona\_centralized\_background\_checks@cbc.gov
  - Subject: Subject of the CBC notification.
  - Reference: The system generated Request ID is listed for reference.
  - Attachments: Link to download the result report.

## Recent Notifications

Here you'll see all of your unread messages. Go to the [Message Center](#) to view all of your messages.

Date ↓	From ↑	Subject ↑	Reference ↑	Attachments ↑
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Employment Registry Check</a>	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - Confirmation of Employment Registry Check Reque...</a>	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Confirmation of Caregiver Registry Check Request Submission</a>	C000000729	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Employment Registry Check</a>	E000000728	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - Confirmation of Employment Registry Check Reque...</a>	E000000728	

1 – 5 of 5 |< < > >| Items per page: 10 ▼

**Figure 58. Recent Notifications Page**

# Draft Forms and Requests

The 'Draft Forms and Requests' section of the Dashboard displays:

- Background check requests started and saved for later (*not submitted*).
- Requests submitted but returned by the DCS Office of Licensing and Regulation (OLR) Background Check Unit for corrections.
- Draft forms/requests will be saved for 30 days from the creation date.

---

## Draft forms and Requests

Here you'll see the saved forms and applications that you haven't submitted. These will be saved for 30 days from the creation date.

<input type="checkbox"/>	Creation Date ↓	Form Type ↑
<input type="checkbox"/>	04/24/2024	<a href="#">Employment Form</a>

1 – 1 of 1 | < > | Items per page: 10 ▼

[Delete Selected](#)


**Figure 59. Draft Forms and Requests**

# Dashboard: Employment Request

The [‘My Employment Requests’](#) section of the Dashboard only displays once an Employment background check request has been submitted. This section includes a:

- Link to view/add employers.
  - The ‘Connected Employer Details’ page displays listing the Representative Name and Email for each connected employer. To add an Employer:
    - Click [‘Add Employer’](#)
    - Enter the email address of the employer’s CBC or DPS PSP account.
    - Click ‘Continue’
    - The ‘Connected Employer Details’ page refreshes and displays the added employer.
  - To remove an Employer, contact them directly to request they remove their access to your employment background checks.
- List of submitted employment requests and the following information for each request.
  - Date Submitted: The date the individual clicked the ‘Submit’ button on the My Order page.
  - Request Number: System generated number used to track the request. The number includes a link to [view the sources](#) included in the background check.
    - APS Registry
    - DCS Central Registry
  - Status:
    - Submitted: The request has been submitted and is ready for processing.
    - In Process: The request is in process and results are typically completed within three business days.
    - Completed: The background check has been completed and the result report is available. Click the paperclip icon to view the result report(s).
    - Expired: The request has expired, and a new request is required for background checks. The result report for this request is still available. Click the paperclip icon to view the result report(s). [See Create and Submit an Employment Request](#) to start a new request.
    - Canceled: The request was submitted but canceled by the requestor prior to completion of the background check result report.
    - Note: A request may also be returned for corrections. If a request is returned, a notification will be sent indicating the reason for the return. The request will be available in the Draft Forms and Requests section of the Dashboard for Individuals.
  - Last Recheck: The CBC initiates periodic rechecks for employment requests and displays the date of the last recheck.
  - Last Record Found: Click to select and download the result report.
  - Action:
    - Cancel: If the status of the request is Submitted or In Progress, the Actions column will show “Cancel”. Click cancel to rescind the CBC background check request. The, click ‘Confirm’ on the popup ‘Confirm you want to cancel this request?’.
    - If the employer is associated with DES, this column displays a [Contract link](#) to view/ update the Solicitation Number, Contract Number, or Provider ID. The number entered on the employment request is listed. Up to five additional numbers can be added. **WARNING:** Confirm with your employer before making changes to existing numbers.
    - [Paperclip icon](#): Click to select and download the result report.

# Dashboard Employment Request Page Examples



## HELLO TEST!

Welcome to your Arizona Centralized Background Checks (CBC) Dashboard


**My Activity**

Message Center

My Favorites

### Recent Notifications



Here you'll see all of your unread messages. Go to the [Message Center](#) to view all of your messages.

Date ↓	From ↑	Subject ↑	Reference ↑	Attachments ↑
04/03/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Employment Registry Check</a>	E000001162	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - Confirmation of Employment Registry Check Reque...</a>	E000000730	

1 - 2 of 2 |< < > >| Items per page: 10 ▼

### My Employment Requests

To see result report, click on the paperclip icon.  
To see the connected employer details click [here](#).  
To see the source(s) requested, click on the Request Number.

Date Submitted ↓	Request Number ↑	Status ↑	Last Recheck ↑	Last Record Found ↑	Action ↑
03/10/2024	<a href="#">E000000730</a>	Completed	03/11/2024	<a href="#">None</a>	<a href="#">Contract</a> 
03/10/2024	<a href="#">E000000728</a>	Expired		<a href="#">None</a>	<a href="#">Contract</a> 

1 - 2 of 2 |< < > >| Items per page: 5 ▼

Figure 60. My Employment Requests

## Connected Employer Details

To remove an employer you are no longer associated with, please use the email listed below to contact them directly.

Name ↓	Email ↑
CBCEmployer CBCEmployer	cbcemployer@yopmail.com

1 – 1 of 1 |< < > >| Items per page: 5 ▼

[Add Employer](#)

Cancel

**Figure 61. View Connected Employers**





Please enter the email address of the employer to whom you want to connect your account.

Employer Email Address\*

---

Cancel

Continue

Figure 62. Add Employer



### Sources Checked

- APS Registry
- DCS Central Registry

**Figure 63. Sources Checked Popup**



**Figure 64. Attachments Popup**



Please add/edit the Contract/Solicitation Number or Provider Id

Number/ID

1289412

[Edit](#)

[Add Another](#)

Close


**Figure 65. Contract Popup**

# Dashboard: Caregiver Request

The '[My Caregiver Requests](#)' section of the Dashboard only displays once a Caregiver background check request has been submitted. This section includes a:

- Submit an additional request for another agency.
- List of submitted caregiver requests and the following information for each request.
  - Date Submitted: The date the individual clicked the 'Submit' button on the My Order page.
  - Request Number: System generated number used to track the request. The number includes a link to [view the sources](#) included in the background check.
    - APS Registry
    - DCS Central Registry
  - Agency Name: The name listed on the account for the connected caregiver agency.
  - Status:
    - Submitted: The request has been submitted and is ready for processing.
    - In Process: The request is in process and results are typically completed within three business days.
    - Completed: The background check has been completed and the result report is available. Click the paperclip icon to view the result report(s).
    - Canceled: The request was submitted but canceled by the requestor prior to completion of the background check result report.
    - Note: A request may also be returned for corrections. If a request is returned, a notification will be sent indicating the reason for the return. The request will be available in the Draft Forms and Requests section of the Dashboard for Individuals.
  - Results: A clickable hyperlink displays. Click to select and download the result report.
  - Action: If the status of the request is Submitted or In Progress, the Actions column will show "Cancel". Click 'Cancel' to rescind the CBC background check request. The, click 'Confirm' on the popup 'Confirm you want to cancel this request?'.
  - [Paperclip icon](#): Click to select and download the result report.

# Dashboard Caregiver Request Page Examples

**HELLO TEST!**  
Welcome to your Arizona Centralized Background Checks (CBC) Dashboard




**My Activity**

**Message Center**

**My Favorites**

### Recent Notifications

Here you'll see all of your unread messages. Go to the [Message Center](#) to view all of your messages.


Date ↓	From ↑	Subject ↑	Reference ↑	Attachments ↑
03/11/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Caregiver Registry Check</a>	C000000729	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Employment Registry Check</a>	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - Confirmation of Employment Registry Check Resue...</a>	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	Confirmation of Caregiver Registry Check Request Submission	C000000729	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Employment Registry Check</a>	F000000728	

1 - 5 of 5 | < > | Items per page: 10 ▼

[Chat with us](#)

### My Caregiver Requests

To see result report, click on the paperclip icon.  
To submit an additional caregiver request for another agency, click [here](#).  
To see the source(s) requested, click on the Request Number.

Date Submitted ↓	Request Number ↑	Agency Name ↑	Status ↑	Results ↑	Action ↑
03/10/2024	<a href="#">C000000729</a>	CBC Test Employer	Completed	<a href="#">None</a>	

1 - 1 of 1 | < > | Items per page: 5 ▼

Figure 66. My Caregiver Requests



### Sources Checked

- APS Registry
- DCS Central Registry

**Figure 67. Sources Checked Popup**



### Attachments

[InitialResults\\_03\\_11\\_2024\\_C000000729.pdf](#)

**Figure 68. Attachments Popup**




# Dashboard: Personal Request

The [‘My Personal Requests’](#) section of the Dashboard only displays once a Personal background check request has been submitted. This section includes a:

- List of submitted personal requests and the following information for each request.
  - Date Submitted: The date the individual clicked the ‘Submit’ button on the My Order page.
  - Request Number: System generated number used to track the request. The number includes a link to [view the sources](#) included in the background check.
    - APS Registry
    - DCS Central Registry
  - Status:
    - Submitted: The request has been submitted and is ready for processing.
    - In Process: The request is in process and results are typically completed within three business days.
    - Completed: The background check has been completed and the result report is available. Click the paperclip icon to view the result report(s).
    - Canceled: The request was submitted but canceled by the requestor prior to completion of the background check result report.
    - Note: A request may also be returned for corrections. If a request is returned, a notification will be sent indicating the reason for the return. The request will be available in the Draft Forms and Requests section of the Dashboard for Individuals.
  - Results: A clickable hyperlink displays. Click to select and download the result report.
  - Action: If the status of the request is Submitted or In Progress, the Actions column will show “Cancel”. Click ‘Cancel’ to rescind the CBC background check request. The, click ‘Confirm’ on the popup ‘Confirm you want to cancel this request?’.
  - [Paperclip icon](#): Click to select and download the result report.
  - Exhibits
  - Employment Request Notification Examples
  - The following section provides examples of notifications you may receive related to Employment requests.

# Dashboard Personal Request Page Examples



## HELLO TEST!

Welcome to your Arizona Centralized Background Checks (CBC) Dashboard




**My Activity**

Message Center

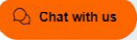
My Favorites

### Recent Notifications

Here you'll see all of your unread messages. Go to the [Message Center](#) to view all of your messages.


Date ↓	From ↑	Subject ↑	Reference ↑	Attachments ↑
03/11/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - No Match Results for Caregiver Registry Check</a>	C000000729	
03/10/2024	Arizona Centralized Background Checks (CBC)	Test_Test - No Match Results for Employment Registry Check	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Test_Test - Confirmation of Employment Registry Check Reque...</a>	E000000730	
03/10/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Confirmation of Caregiver Registry Check Request Submission</a>	C000000729	
03/10/2024	Arizona Centralized Background Checks (CBC)	Test_Test - No Match Results for Employment Registry Check	E000000728	

1 - 5 of 5 |< < > >| Items per page: 10 ▼



### My Personal Requests

To see the result report, click on the paperclip icon  
To see the source(s) requested, click on the Request Number.

Date Submitted ↓	Request Number ↑	Status ↑	Result ↑	Action ↑
03/11/2024	<a href="#">I000000782</a>	Completed	<a href="#">None</a>	

1 - 1 of 1 |< < > >| Items per page: 5 ▼

Figure 69. My Personal Requests



### Sources Checked

- APS Registry
- DCS Central Registry

**Figure 70. Sources Checked Popup**



### Attachments

[InitialResults\\_03\\_11\\_2024\\_C000000729.pdf](#)

**Figure 71. Attachments Popup**

# Dashboard: Fingerprint Clearance Card (FCC)

The 'My Fingerprint Clearance Card Applications and Requests' section of the Dashboard displays if an FCC application or card is linked to the DPS PSP account. This section includes a:

- A link 'To see the connected employer's details': Click the 'here' link.
- A list of applications and cards and the following information for each record:
  - Date Received
  - Application Number
  - Card Type
  - Invoice
  - Card Status
  - Card No
  - Decision Date
  - Expiration Date

# Dashboard FCC Page Examples

### My Fingerprint Clearance Card Applications and Requests

To see connected employers click [here](#)

Date Received ↓	Application Number ↑	Card Type ↑	Invoice ↑	Status ↑	Card No ↑	Decision Date ↑	Expiration Date ↑
3/12/2024	<a href="#">P024396575</a>	Regular - New	Paid	In Process			

1 - 1 of 1 |< < > >| Items per page: 5 ▼

Figure 72. My Fingerprint Clearance Card Applications and Requests

## Connected Employer Details

Name ↑

Email ↑

CBCEmployer CBCEmployer

cbcemployer@yopmail.com

+ [Link Employer](#)

Cancel

Figure 73. View Connected Employers



Please enter the email address of the employer to whom you want to connect your account.

Employer Email Address\*

---

Cancel

Continue

Figure 74. Add Employer



# Message Center



When the CBC generates a notification, an email is sent to the email address listed on the account to indicate a new message is available. The 'Message Center' contains the notifications generated by the CBC. Login to the CBC, click 'Messages' in the upper right header.

The Message Center includes:

- **Inbox:** List of all read (*un-bolded*) and unread (*bolded*) inbox messages and the following details:
  - **Date:** The date the CBC generated the notification.
  - **From:** arizona\_centralized\_background\_checks@cbc.gov
  - **Subject:** Subject of the CBC notification.
  - **Reference:** The system generated Request ID is listed for reference.
  - **Attachments:** A paperclip icon displays if there is a result report to download. **Note:** Download and save each result report for your records.
- **Follow Up:** Click the checkbox next to one or more messages in the Inbox. The following options display:
  - **Delete:** Click the trash icon to delete the selected messages. Then, click 'Delete' to confirm: 'You are about to delete the selected message(s) from your inbox.' **Note:** The messages will no longer be displayed in the Message Center. However, they can be retrieved using the search option.
  - **Follow Up flag:** Click the flag icon to move the Inbox messages to the 'Follow Up' tab. Click the 'Follow Up' link to view the messages flagged for follow up. From the 'Follow Up' tab,
    - Click the checkbox next to one or more messages.
    - Click the trash icon to delete the selected messages OR
    - Click the flag icon to move the messages back to the Inbox
- **Search:**
  - To search by a date range, click the calendar icon. Then enter a 'Start Date' and 'End Date'.
  - For any other search, enter a value in "Type Something" and click the search icon.

## Message Center

[Inbox](#) [Follow Up](#)



<input type="checkbox"/>	Date ↓	From ↑	Subject ↑	Request ↑	Attachments
<input type="checkbox"/>	03/06/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Ticket, Cherwell - No Match Results for Individual/Personal Registr...</a>	I000000596	
<input type="checkbox"/>	<b>03/06/2024</b>	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Confirmation of Individual/Personal Registry Check Re...</a></b>	<b>I000000596</b>	
<input type="checkbox"/>	03/05/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Ticket, Cherwell - No Match Results for Individual/Personal Registr...</a>	I000000557	
<input type="checkbox"/>	<b>03/05/2024</b>	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Confirmation of Individual/Personal Registry Check Re...</a></b>	<b>I000000557</b>	
<input type="checkbox"/>	<b>02/06/2024</b>	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Ticket, Cherwell - Match Results for Employment Regi...</a></b>	<b>E000000100</b>	
<input type="checkbox"/>	02/06/2024	Arizona Centralized Background Checks (CBC)	<a href="#">null - Confirmation of Employment Registry Check Request Submis...</a>	E000000100	

1 – 6 of 6 | < > | Items per page: 10 ▼

Figure 75. Inbox

## Message Center

[Inbox](#) [Follow Up](#)

<input type="checkbox"/>	Date ↓	From ↑	Subject ↑	Request ↑	Attachments
<input checked="" type="checkbox"/>	03/06/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Ticket, Cherwell - No Match Results for Individual/Personal Registr...</a>	I000000596	
<input type="checkbox"/>	03/06/2024	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Confirmation of Individual/Personal Registry Check Re...</a></b>	<b>I000000596</b>	
<input type="checkbox"/>	03/05/2024	Arizona Centralized Background Checks (CBC)	<a href="#">Ticket, Cherwell - No Match Results for Individual/Personal Registr...</a>	I000000557	
<input type="checkbox"/>	03/05/2024	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Confirmation of Individual/Personal Registry Check Re...</a></b>	<b>I000000557</b>	
<input type="checkbox"/>	02/06/2024	<b>Arizona Centralized Background Checks (CBC)</b>	<b><a href="#">Ticket, Cherwell - Match Results for Employment Regi...</a></b>	<b>E000000100</b>	
<input type="checkbox"/>	02/06/2024	Arizona Centralized Background Checks (CBC)	<a href="#">null - Confirmation of Employment Registry Check Request Submis...</a>	E000000100	

1 – 6 of 6 | < < > > | Items per page: 10 ▼



**Figure 76. Delete and Follow Up Options**





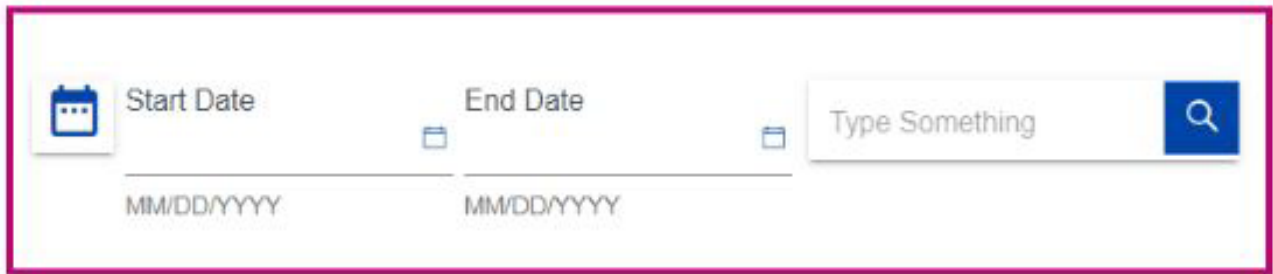
## Delete messages?

You are about to delete the selected message(s) from your Inbox.

Cancel

Delete

**Figure 78. Delete Messages Popup**



The image shows a search interface with three main components: a date picker for 'Start Date', a date picker for 'End Date', and a search input field. The 'Start Date' and 'End Date' fields are separated by a horizontal line. Below each date field is a placeholder text 'MM/DD/YYYY'. The search input field contains the text 'Type Something' and a magnifying glass icon on the right side.

**Figure 79. Search Options**

# Notifications

Click the link in the 'Subject' column for a notification you would like to view. Use the scroll bar on the right, if needed, to view the whole message. The options within the notification are:

- Click 'X' or 'Close' to return to the Inbox or Follow Up tab.
- Click the trash icon to delete the selected messages OR
- Click the flag icon to move the messages back to the Inbox



## Test, Test - Confirmation of Employment Registry Check Request Submission

**From:** Arizona Centralized Background  
Checks (CBC)

**Date:** 04/03/2024

**Request :** E000001162

This message serves as a confirmation that you have successfully submitted an employment registry check request for CBC Test Employer. If you would like to add an additional employer, please navigate to your [Dashboard](#) and click the [Connect to my Employer](#) link.

Your request has been submitted for:  
Department of Child Safety (DCS) Central Registry  
Arizona Adult Protective Services (APS) Registry

You may view the status of the request on your [Dashboard](#). You will be notified once the results have been processed.

**Figure 80. Example Notification**



# Update Profile

The account profile is shared for the CBC and the DPS PSP portals. The profile includes the following information that can be updated. The information below can be updated from either the CBC or the DPS PSP except the name on the account. See Name Change.

- [Profile Information](#)
  - Name
  - Date of Birth
  - Email Address
  - Phone Numbers
- [Address](#)
  - Physical Address
  - Mailing Address
- [Security](#)
  - Password
  - Security Questions and Answers
- [Notifications \(On/Off\)](#)
  - Email
  - Text Messages: Not Available

To change the profile information:

- Login to the CBC and click the 'Hi <username>' link in the header.
- Select the 'Profile' option.
- Enter your account password and click 'Continue'.
- Select the applicable tab and enter the updates:
  - Profile Information
  - Address
  - Security
  - Notifications
- Click "Save Changes".

## Name Change

If your account has any DPS PSP cards or applications (fingerprint clearance card, security guard/private investigator license, and/or student transportation certification/identification), the name change must be submitted through the [DPS PSP](#). Once DPS approves the name change request, the new name will display in the CBC profile.

If your name has changed and you have an employment background check, you must submit a new CBC employment request. If the name change is pending DPS approval, enter your new name as an alias on the employment request. For the signature page of the request, you must enter the current name from the account profile.

If you do not have any DPS PSP cards or applications, the name change can be submitted in the CBC as follows:

- Login to the CBC and click the 'Hi <username>' link in the header.
- Select the 'Profile' option.
- Click 'Update Name'.
- Change the Legal First Name, Middle Initial, and/or Legal Last Name.
- Click "Save Changes".

# Update Profile Page Examples

**Password Required**

\*Indicates required field.

To view this page, re-enter your password.

Password\*

Cancel Continue

**Figure 81. Update Profile: Enter Password**

## Profile Information

\*Indicates required field.

Important: If you are making a name change, you must also submit a new background check request by clicking [here](#)

Update Name

Update Email or Phone

Legal First Name\*

Test

Middle Initial

Legal Last Name\*

Test

Date of Birth\*

1/1/1970



MM/DD/YYYY

Email\*

cbctest@yopmail.com

Phone Type

Mobile



Phone #

(000)000-0000

Phone Type

Home



Phone #

(000)000-0000

+ [Add another number](#)

Figure 82. User Profile: Profile Tab

[Profile](#)   [Address](#)   [Security](#)   [Notification](#)

### Address Information

Edit your address here:  
\*Indicates required field.

**Update Address**

---

#### Physical Address

Address\*  
134 Test Road

Apt

City\*  
PHOENIX

State\*      Zip Code\*  
AZ      85007

---

#### Mailing Address

Mailing is the same as Physical Address

Address\*  
134 Test Road

Apt

City\*  
PHOENIX

State\*      Zip Code\*  
AZ      85007

**Figure 83. User Profile: Address Tab**

## Password and Security Questions

Update your Password and Security Questions here. All fields are required except for the ones marked as optional:

\*Indicates required field.

Password

**Update Password**

Security Questions

**Update Security Questions**

Security Question #1 \*

Who was your childhood hero?



Answer \*

.....



Security Question #2 \*

What was your childhood nickname?



Answer \*

.....



Security Question #3 \*

What was your dream job as a child?



Answer \*

.....



**Figure 84. User Profile: Security Tab**

---

[Profile](#)

[Address](#)

[Security](#)

[Notification](#)

---

## Notification Preferences

Control what notifications you receive from us.


---

Receive Email Notification

Receive Text Notification

---

**Figure 85. User Profile: Notification Tab**



## Update your Profile Information?

You are about to update the Information associated with your Profile.  
Do you want to save the changes made to your account?



Profile changed successfully.



**Figure 86. User Profile: Update Confirmation**



## Employment Request Notification Examples

The following section provides examples of notifications you may receive related to Employment requests.



### Test, Test - Confirmation of Employment Registry Check Request Submission

**From:** Arizona Centralized Background Checks **Date:** 04/03/2024  
(CBC)

**Request :** E000001162

This message serves as a confirmation that you have successfully submitted an employment registry check request for CBC Test Employer. If you would like to add an additional employer, please navigate to your [Dashboard](#) and click the [Connect to my Employer](#) link.

Your request has been submitted for:  
Department of Child Safety (DCS) Central Registry  
Arizona Adult Protective Services (APS) Registry

You may view the status of the request on your [Dashboard](#). You will be notified once the results have been processed.

### Exhibit 1: Confirmation of Employment Registry Check Request Submission



## **Test, Test - Cancellation Confirmation of Employment Registry Check**

**From:** Arizona Centralized Background Checks **Date:** 03/21/2024  
(CBC)

**Request :** E000001115

This message serves as a confirmation that you have canceled your Employment request. If this was done in error, you will need to submit a new request by navigating to the Requests page [here](#).

### **Exhibit 2: Cancellation Confirmation – Employment Request**



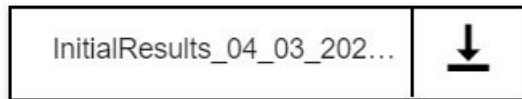
## Test, Test - No Match Results for Employment Registry Check

**From:** Arizona Centralized Background Checks **Date:** 04/03/2024  
(CBC)

**Request :** E000001162

You have received this notice regarding the employment registry check that has been completed. The employee and employer have been notified.

Please download the attached document to view your results.



[!\[\]\(e474458956c9a37fbf9586ddb60a7fa1\_img.jpg\) Download All](#)

### Exhibit 3: No Match Results for Employment Registry Check



## Roads, Country - Match Results for Employment Registry Check

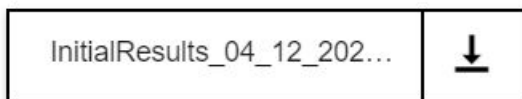
**From:** Arizona Centralized Background Checks (CBC)

**Date:** 04/12/2024

**Request :** E000001240

You have received this notice regarding the employment registry check that has been completed. The employee and employer have been notified.

Please download the attached document to view your results.



[Download All](#)

### Exhibit 4: Match Results for Employment Registry Check



## Roads, Country - DCS Registry Match - Recheck Results

**From:** Arizona Centralized Background Checks (CBC)

**Date:** 05/02/2024

**Request :** E000001321

The Arizona Centralized Background Checks (CBC) system performs periodic rechecks for employment background check requests. You have received this notice regarding new substantiated findings for Roads, Country that have been found on the Department of Child Safety (DCS) Registry since the last result report. The employee and employer have been notified.



[↓ Download All](#)

### Exhibit 5: DCS Recheck Result for Employment Request



## Roads, Country - APS Registry Match - Recheck Results

**From:** Arizona Centralized Background Checks (CBC)

**Date:** 05/02/2024

**Request :** E000001321

The Arizona Centralized Background Checks (CBC) system performs periodic rechecks for employment background check requests. You have received this notice regarding new substantiated findings for Roads, Country that have been found on the Arizona Adult Protective Services (APS) Registry since the last result report. The employee and employer have been notified.



[Download All](#)

### Exhibit 6: APS Recheck Result for Employment Request



## Roads, Country - Employment Background Check Expired

**From:** Arizona Centralized Background Checks (CBC)

**Date:** 04/10/2024

**Request :** E000000956

An employment background check for Roads, Country has expired. If you are still employed with your company, you must submit a new employment background check as soon as possible to ensure it does not affect your ongoing employment/ability to provide services.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#).

### Exhibit 7: Expired Employment Background Check



## Test, Test - Annual Employment Registry Check Due

**From:** Arizona Centralized Background Checks **Date:** 04/16/2024  
(CBC)

**Request :** E000001236

An annual Employment Registry Check is due for Test, Test . Your Employer has been notified.

You must submit an employment background check **as soon as possible** to ensure it does not affect your ongoing employment/ability to provide services.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#). To remove an employer, contact them directly to request they remove your employment background check request.

### Exhibit 8: Annual Employment Registry Check Due





## **Test, Test - Annual Employment Registry Check** **Due in 3 Days**

**From:** Arizona Centralized Background Checks **Date:** 04/10/2024  
(CBC)

**Request :** E000001073

An annual Employment Registry Check is due in **3 days** for Test, Test. Your Employer has been notified.

You must submit an employment background check **as soon as possible** to ensure it does not affect your ongoing employment/ability to provide services. This will serve as your **final notice** before your current background check expires.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#). To remove an employer, contact them directly to request they remove your employment background check request.

### **Exhibit 9: Annual Employment Registry Check – Due in 3 Days**



## **Test, Test - Annual Employment Registry Check Not Completed**

**From:** Arizona Centralized Background Checks **Date:** 04/17/2024  
(CBC)

**Request :** E000001236

An annual Employment Registry Check was not completed for Test, Test  
Your Employer has been notified.

If you are still employed, you must submit an employment background check as soon as possible to ensure it does not affect your ongoing employment/ability to provide services. Your current background check has expired.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#). To remove an employer, contact them directly to request they remove your employment background check request.

### **Exhibit 10: Annual Employment Registry Check – Not Completed**

---

## Test, Test - Account Name Changed – Updated Employment Background Check Request Required

**From:** Arizona Centralized Background Checks (CBC)

**Date:** 05/25/2024

**Request :** E000001485

The name on your account has been changed. You must submit an employment background check with your new name **as soon as possible** to ensure it does not affect your ongoing employment/ability to provide services. This will serve as your **only notice** before your current background check expires.

Your Employer has been notified.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#). To remove an employer, contact them directly to request they remove your employment background check request.

Previous Name: Test, Test

New Name: Case, Test

---

**Exhibit 11: Account Name Changed – Updated Employment Background Check Request Required**



## **TEST, TEST - Account Name Changed – Updated Employment Background Check Request Not Completed**

**From:** Arizona Centralized Background Checks **Date:** 03/11/2024  
(CBC)

**Request :** E000000674

The name on your account has been changed. An updated Employment Registry Check was not submitted. Your current background check has expired.

Your Employer has been notified.

If you are still employed, you must submit an employment background check **as soon as possible** to ensure it does not affect your ongoing employment / ability to provide services.

Click [here](#) to submit an employment background check request. To view your connected employers, click [here](#). To remove an employer, contact them directly to request they remove your employment background check request.

Previous Name: TEST, TEST

New Name: CASE, TEST

**Exhibit 12: Account Name Changed – Updated Employment Background Check Request Not Completed**

# Caregiver Request Notification Examples

The following section provides examples of notifications you may receive related to Caregiver requests.



## Confirmation of Caregiver Registry Check Request Submission

**From:** Arizona Centralized Background Checks **Date:** 03/10/2024  
(CBC)

**Request :** C000000729

This message serves as a confirmation that you have successfully submitted a caregiver registry check request for:  
Department of Child Safety (DCS) Central Registry  
Arizona Adult Protective Services (APS) Registry

You may view the status of the request on your [Dashboard](#). You will be notified once the results have been processed.

### Exhibit 13: Confirmation of Caregiver Registry Check Request Submission



## **Test, Test - Cancellation Confirmation of Caregiver Registry Check**

**From:** Arizona Centralized Background Checks **Date:** 05/23/2024  
(CBC)

**Request :** C000001340

This message serves as a confirmation that you have canceled your Caregiver request. If this was done in error, you will need to submit a new request by navigating to the Requests page [here](#).

### **Exhibit 14: Cancellation Confirmation - Caregiver Request**



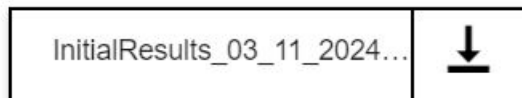
## Test, Test - No Match Results for Caregiver Registry Check

**From:** Arizona Centralized Background Checks **Date:** 03/11/2024  
(CBC)

**Request :** C000000729

You have received this notice regarding the caregiver registry check that has been completed. The caregiver and agency have been notified.

Please download the attached document to view the results.



[Download All](#)

### Exhibit 15: No Match Results for Caregiver Registry Check





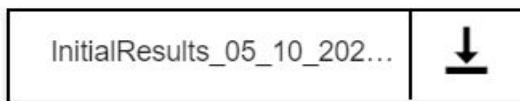
## Roads, Country - Match Results for Caregiver Registry Check

**From:** Arizona Centralized Background Checks **Date:** 05/10/2024  
(CBC)

**Request :** C000001431

You have received this notice regarding the caregiver registry check that has been completed. The caregiver and agency have been notified.

Please download the attached document to view the results.



[Download All](#)

### Exhibit 16: Match Results for Caregiver Registry Check





## Test, Test - Returned DCS Registry Check Request

**From:** Arizona Centralized Background Checks **Date:** 04/26/2024  
(CBC)

**Request :** C000001339

Your Department of Child Safety (DCS) Registry Check has been returned because of the following: The form is missing a signature.

Go to your Draft Forms and Requests, open your request to make the required updates, then resubmit your request. Click [here](#) to go to your dashboard, then scroll down to locate the Draft Forms and Requests tile.

### Exhibit 17: Returned Caregiver Request

# Individual/Personal Request Notification Examples

The following section provides examples of notifications you may receive related to Individual/Personal requests.



## Confirmation of Individual/Personal Registry Check Request Submission

**From:** Arizona Centralized Background Checks **Date:** 03/11/2024  
(CBC)

**Request :** I000000782

This message serves as a confirmation that you have successfully submitted an individual/personal registry check request for:  
Department of Child Safety (DCS) Central Registry  
Arizona Adult Protective Services (APS) Registry

You may view the status of the request on your [Dashboard](#). You will be notified once the results have been processed.

### Exhibit 18: Confirmation of Individual/Personal Registry Check Request Submission



## Test, Test - Cancellation Confirmation of Individual/Personal Registry Check

**From:** Arizona Centralized Background Checks **Date:** 05/23/2024  
(CBC)

**Request :** I000001487

This message serves as a confirmation that you have canceled your Individual/Personal request. If this was done in error, you will need to submit a new request by navigating to the Requests page [here](#).

**Exhibit 19: Cancellation Confirmation – Individual/Personal Request**

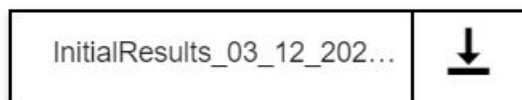


## Test, Test - No Match Results for Individual/Personal Registry Check

**From:** Arizona Centralized Background Checks **Date:** 03/11/2024  
(CBC)

**Request :** I000000782

You have received this notice regarding the individual/personal registry check that has been completed. Please download the attached document to view your results.



[Download All](#)

### Exhibit 20: No Match Results for Individual/Personal Registry Check

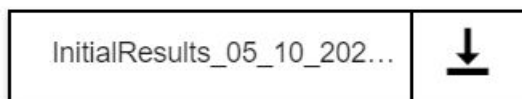


## Roads, Country - Match Results for Individual/Personal Registry Check

**From:** Arizona Centralized Background Checks **Date:** 05/10/2024  
(CBC)

**Request :** I000001430

You have received this notice regarding the individual/personal registry check that has been completed. Please download the attached document to view your results.



[Download All](#)

**Exhibit 21: Match Results for Individual/Personal Registry Check**



## Test, Test - Returned DCS Registry Check Request

**From:** Arizona Centralized Background Checks (CBC)

**Date:** 05/23/2024

**Request :** I000001486

Your Department of Child Safety (DCS) Registry Check has been returned because of the following:

Go to your Draft Forms and Requests, open your request to make the required updates, then resubmit your request. Click [here](#) to go to your dashboard, then scroll down to locate the Draft Forms and Requests tile.

### Exhibit 22: Returned Individual/Personal Request

# Result Report Examples

The following section provides examples of the result reports you may receive.



As required by and in accordance with Arizona Revised Statute (ARS) § 8-804; Contractors, Subcontractors and Offerors are required to submit the “Request for Search of Central Registry for Background Check” form for each employee or prospective employee of the Contractor, Subcontractor or Offeror who provides direct services to children or vulnerable adults. For employers that support the Department of Economic Security - Division of Child Care, this check is required by and in accordance with Arizona Revised Statute (ARS) § 8-804 and the Code of Federal Regulations (CFR) Title 45 § 98.43.

Employers must confirm that the Request Summary section of this report accurately lists the applicant/employee's first name, last name, middle name, date of birth, and alias names. The registry checks are completed based on the information provided by the applicant/employee on the request form. If the information is incorrect, instruct the applicant/employee to submit a new request with correct information.

Registry Checks have been completed for Test Test for the Department of Child Safety (DCS) and the Arizona Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.



## Department of Child Safety (DCS) Central Registry Check Results

After conducting a search of the Department of Child Safety (DCS) Central Registry database on the referenced individual, no person(s) submitted for background check has a substantiated finding of child abuse or neglect on the Central Registry database.

Check Completed by: Office of Licensing and Regulation (OLR) Background Check Unit

Date: 04-26-2024

## Arizona Adult Protective Services (APS) Registry Check Results

After conducting a search of the Arizona Adult Protective Services (APS) Registry on the referenced individual, no person(s) submitted for background check has a substantiated finding in Arizona of abuse, neglect, or exploitation of a vulnerable adult on the APS Registry.

### Request Summary:

Request Number : E000001336

Date Submitted : 04-26-2024

First Name : Test

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 01/01/1970

Physical Address : 134 Test Road

Apt. :

City : PHOENIX

State : AZ

Zip : 85007

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/Contract Number(s) or Provider ID(s) : 123489

Have you lived at your current address for five (5) years or longer? : no

Previous Name(s) :

First Name: Sue Last Name: Test

Are you currently the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction? : yes

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? : yes

Investigation Information :

What was the allegation? : test When was the investigation? : test Where was the investigation? : test

Additional Information : test



**Previous Address Information:**

Address 1 :

Address : 1234 Test Road

Apt :

City : Tucson

Country : USA

From : 02/01/2024

To : 03/22/2024



**Exhibit 23: Employment Background Check Request – No Match Found**



Registry Checks have been completed for Country Roads for the Department of Child Safety (DCS) and the Arizona Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.

### **Department of Child Safety (DCS) Central Registry Check Results**

As required by and in accordance with Arizona Revised Statute (ARS) § 8-804; Contractors, Subcontractors and Offerors are required to submit the “Request for Search of Central Registry for Background Check” form for each employee or prospective employee of the Contractor, Subcontractor or Offeror who provides direct services to children or vulnerable adults. For employers that support the Department of Economic Security - Division of Child Care, this check is required by and in accordance with Arizona Revised Statute (ARS) § 8-804 and the Code of Federal Regulations (CFR) Title 45 § 98.43.

Employers must confirm that the Request Summary section of this report accurately lists the applicant/employee's first name, last name, middle name, date of birth, and alias names. The registry checks are completed based on the information provided by the applicant/employee on the request form. If the information is incorrect, instruct the applicant/employee to submit a new request with correct information.

After conducting a search of the Department of Child Safety (DCS) Central Registry for Employment the listings below provide all of the substantiated findings associated with the individual named below.

**Requester Name, Date of Birth : Country Roads, 07-21-1990**

Allegation	Allegation Code/ Description	Intake ID #	Disqualifying or Non-Disqualifying	Date Exception Approved
Emotional Abuse	Incident or pattern of behavior directed toward child/ interferes with normal functioning (berating, name calling,	IN00026196	Disqualifying	

The individual named above may contact the DCS Protective Services Review Team at (602) 255- 2699 regarding this report referencing the Report ID cited above. To see a listing of the Disqualifying acts, please click on this link [DCS Forms | Arizona Department of Child Safety \(az.gov\)](#) and search for “CSO-3037”.

A Central Registry for Employment Exception may be requested by the individual through the Arizona Board of Fingerprinting (AzBOF) for the Disqualifying Acts only. Additional information can be found at [https:// fingerprint.az.gov](https://fingerprint.az.gov) . They can be reached by mail at Arizona Board of Fingerprinting, P.O. Box 6129 - Mail Code 185, Phoenix, AZ 85005 or by phone at (602) 265-0135 or via email at [info@fingerprint.az.gov](mailto:info@fingerprint.az.gov)

If an exception is approved by AzBOF, the prospective employee should submit that letter to the prospective employer for consideration in the hiring process. An exception approval does not guarantee employment on all substantiated findings that apply to either Disqualifying or Non-Disqualifying findings.

Check Completed by: Office of Licensing and Regulation (OLR) Background Check Unit

Date: 04-23-2024

**Arizona Adult Protective Services (APS) Registry Check Results**

Employers are encouraged to review the APS registry when deciding whether to employ a person to provide care for vulnerable populations. The decision to hire a person listed on the APS Registry is solely up to the employer. Refer to A.R.S. § 46-459.

Employers may consider using the [AAA-1355A - APS Registry Employer Certification Form](#) to



capture and resolve any APS findings with the applicant/employee and place the completed form in the Human Resources file.

The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected, or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

**Requester Name, Date of Birth : Country Roads, 07-21-1990**

Match Type	Match Details	Findings	Description of Disposition	Date Placed on Registry
Partial Match	Alias Last Name Date Of Birth	Neglect	On or about 2020, NAME (date of birth ), while acting as the owner of the assisted living home at which a vulnerable adult resided, failed to provide the vulnerable adult with supervision as NAME wore headphones and stayed on the second floor of the home while the vulnerable adult was on the first floor. As a result, NAME would have been unable to hear the vulnerable adult if she needed assistance. Such conduct is prohibited per A.R.S. § 46-451(A)(7).	04-20-2023

## Request Summary:

Request Number : E000001321

Date Submitted : 04-23-2024

First Name : Country

Middle Name :

Last Name : Roads

Suffix :

Date of Birth : 07/21/1990

Physical Address : 17 COUNTY ROAD 2054

Apt. :

City : Alpine

State : AZ

Zip : 85290

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/Contract Number or Provider ID : 897845

Have you lived at your current address for five (5) years or longer? : yes

Are you currently the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction? : no

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? : no

Additional Information : null

**Previous Address Information:**None

# ARIZONA

Centralized Background Checks

**Exhibit 24: Employment Background Check Request – Match Found**





As required by and in accordance with Arizona Revised Statute (ARS) § 8-804; Contractors, Subcontractors and Offerors are required to submit the “Request for Search of Central Registry for Background Check” form for each employee or prospective employee of the Contractor, Subcontractor or Offeror who provides direct services to children or vulnerable adults. For employers that support the Department of Economic Security - Division of Child Care, this check is required by and in accordance with Arizona Revised Statute (ARS) § 8-804 and the Code of Federal Regulations (CFR) Title 45 § 98.43.

Employers must confirm that the Request Summary section of this report accurately lists the applicant/employee's first name, last name, middle name, date of birth, and alias names. The registry checks are completed based on the information provided by the applicant/employee on the request form. If the information is incorrect, instruct the applicant/employee to submit a new request with correct information.

The Arizona Centralized Background Checks (CBC) system performs periodic rechecks for employment background check requests. A recheck of the Department of Child Safety (DCS) Registry has been completed for Country Roads and the listings below provide only new substantiated findings since the last result report. The report also includes the initial background check request details as provided by the requester.

**Requester Name: Country Roads**

Allegation	Allegation Code/ Description	Intake ID #	Disqualifying or Non-Disqualifying	Date Exception Approved
Neglect	Unwilling or unable to meet child's needs for medical health care	IN00026196	Non-Disqualifying	

The individual named above may contact the DCS Protective Services Review Team at (602) 255- 2699 regarding this report referencing the Report ID cited above.

A Central Registry for Employment Exception may be requested by the individual through the Arizona Board of Fingerprinting (AzBOF) for the Disqualifying Acts only. Additional information can be found at [https:// fingerprint.az.gov](https://fingerprint.az.gov). They can be reached by mail at Arizona Board of Fingerprinting, P.O. Box 6129 - Mail Code 185, Phoenix, AZ 85005 or by phone at (602) 265-0135 or via email at [info@fingerprint.az.gov](mailto:info@fingerprint.az.gov)

If an exception is approved by AzBOF, the prospective employee should submit that letter to the prospective employer for consideration in the hiring process. An exception approval does not guarantee employment on all substantiated findings that apply to either Disqualifying or Non-Disqualifying findings.

Check Completed by: Office of Licensing and Regulation (OLR) Background Check Unit

Date: 05-02-2024

**Request Summary:**

Request Number : E000001321

Date Submitted : 04-23-2024

First Name : Country

Middle Name :

Last Name : Roads

Suffix :

Date of Birth : 07/21/1990

Physical Address : 17 COUNTY ROAD 2054

Apt. :

City : Alpine

State : AZ

Zip : 85290

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/ Contract Number(s) or Provider  
ID(s) : 123456

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? : no

Additional Information : null

**Previous Address Information:**None



**Exhibit 25: Employment Recheck – DCS Match Found**





DEPARTMENT OF  
ECONOMIC SECURITY

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The Arizona Centralized Background Checks (CBC) system performs periodic rechecks for employment background check requests. A recheck of the Adult Protective Services (APS) Registry has been completed for Country Roads and the listings below provide only new substantiated findings since the last result report. The report also includes the initial background check request details as provided by the requester.

### Arizona Adult Protective Services (APS) Registry Check Results

Employers are encouraged to review the APS registry when deciding whether to employ a person to provide care for vulnerable populations. The decision to hire a person listed on the APS Registry is solely up to the employer. Refer to A.R.S. § 46-459.

Employers may consider using the [AAA-1355A - APS Registry Employer Certification Form](#) to capture and resolve any APS findings with the applicant/employee and place the completed form in the Human Resources file.

The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected, or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

#### Requester Name, Date of Birth : Country Roads, 07-21-1990

Match Type	Match Details	Findings	Description of Disposition	Date Placed on Registry
Partial Match	Alias Last Name Date Of Birth	Neglect	On or about _____, NAME (date of birth _____), while acting as the owner of the assisted living home at which a vulnerable adult resided, failed to provide the vulnerable adult with supervision as NAME wore headphones and stayed on the second floor of the home while the vulnerable adult was on the first floor. As a result, NAME would have been unable to hear the vulnerable adult if she needed assistance. Such conduct is prohibited per A.R.S. § 46-451(A)(7).	04-26-2024



Date: 05-02-2024

**Request Summary :**

Request Number : E000001321

Date Submitted : 04-23-2024

First Name : Country

Middle Name :

Last Name : Roads

Suffix :

Date of Birth : 07/21/1990

Physical Address : 17 COUNTY ROAD 2054

Apt. :

City : Alpine

State : AZ

Zip : 85290

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/Contract Number(s) or Provider

ID(s) : ,undefined,undefined,undefined,undefined,undefined,undefined

Have you lived at your current address for five (5) years or longer? : yes

Are you currently the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction? : no

Have you ever been the SUBJECT (NOT THE VICTIM) of an investigation of child abuse or child neglect in Arizona, or another state or jurisdiction that resulted in a substantiated (determined to have occurred) finding? : no

Additional Information : null

**Previous Address Information:**None



**Exhibit 26: Employment Recheck – APS Match Found**



DEPARTMENT OF  
ECONOMIC SECURITY

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Registry Checks have been completed for the requester Test Test, and the additional adult household members, for the Department of Child Safety (DCS) and the Arizona Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.

### **Department of Child Safety (DCS) Central Registry Check Results**

After conducting a search of the Department of Child Safety (DCS) Central Registry database on the referenced individual, no person(s) submitted for background check has a substantiated finding of child abuse or neglect on the Central Registry database.

### **No Substantiated Findings**

The names listed below do not have a record in the DCS Central Registry.

Test Test

John Test

Jamie Test

Check Completed by: Worker, Test

Date: 04-26-2024

## Arizona Adult Protective Services (APS) Registry Check Results

After conducting a search of the Arizona Adult Protective Services (APS) Registry on the referenced individual, no person(s) submitted for background check has a substantiated finding in Arizona of abuse, neglect, or exploitation of a vulnerable adult on the APS Registry.

### No Substantiated Findings

The names listed below do not have a record in the APS Registry.

Test Test

John Test

Jamie Test

### Request Summary:

Request Number : C000001337

Date Submitted : 04-26-2024

First Name : Test

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 01/01/1970

Physical Address : 134 Test Road

Apt. :

City : PHOENIX

State : AZ

Zip : 85007

Fingerprint Clearance Card Application Number : 1234567

Have you lived at your current address for five (5) years or longer? : no

Previous Name(s) :

First Name: Alice Last Name: Test

### Previous Address Information:

Address 1 :

Address : 1234 Main St

Apt :

City : Phoenix

Country : USA

From : 01/01/2018

To : 01/01/2020

## **Adult Household Member Information:**

Adult 1 :

First Name : John

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 01/01/1998

Fingerprint Clearance Card Application Number : 87654351

Previous Name(s) :

First Name: Alias    Last Name: Test

Adult 2 :

First Name : Jamie

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 10/01/1998

Fingerprint Clearance Card Application Number : 2358964

## **Child Household Member Information:**

Child 1 :

First Name : Child

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 01/01/2024



**Exhibit 27: Caregiver Background Check Request – No Match Found**



Registry Checks have been completed for the requester Country Roads, and the additional adult household members, for the Department of Child Safety (DCS) and the Arizona Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.

### Department of Child Safety (DCS) Central Registry Check Results

After conducting a search of the Department of Child Safety (DCS) Central Registry for a Caregiver request, the following results were found for the requester and/or adult household members.

#### Substantiated Findings

Name	Allegation	Allegation Code/Description	Intake ID #	Disqualifying or Non-Disqualifying	Date Exception Approved
Country Roads	Emotional Abuse	Incident or pattern of behavior directed toward child/interferes with normal functioning (berating, name calling, targeting, rejection)	IN00026196	Disqualifying	

This notice serves as information purposes only. DCS Central Registry is unable to provide any further information. If the named individual wishes to obtain more details regarding the substantiation, please direct them to the DCS website located at <https://dcs.az.gov/resources/request-dcs-information>. Once on the DCS website, they can find the forms CSO-1036A (-S) in the "Area of Request" "Case File Records, complete the form, and submit as directed on the second page of the form. The named individual can also dispute a report by calling 602-255-2699 and following the prompts.

A Central Registry Exception may be requested by the individual through the Arizona Board of Fingerprinting (AzBOF). Additional information can be found at <https://fingerprint.az.gov>. They can be reached by mail at Arizona Board of Fingerprinting, P.O. Box 6129 - Mail Code 185, Phoenix, AZ 85005 or by phone at (602) 265-0135 or via email at <https://fingerprint.az.gov/central-registry-exception-process>.

## No Substantiated Findings

All person(s) had substantiated finding(s), see above.

Check Completed by: Worker, Test

Date: 05-10-2024

## Arizona Adult Protective Services (APS) Registry Check Results

Employers are encouraged to review the APS registry when deciding whether to employ a person to provide care for vulnerable populations. The decision to hire a person listed on the APS Registry is solely up to the employer. Refer to A.R.S. § 46-459.

Employers may consider using the [AAA-1355A - APS Registry Employer Certification Form](#) to capture and resolve any APS findings with the applicant/employee and place the completed form in the Human Resources file.

The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected, or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

## Substantiated Findings

Name	Match Type	Match Details	Findings	Description of Disposition	Date Placed on Registry
Country Roads	Partial Match	Alias Last Name Date Of Birth	Neglect	On or about 2020, NAME (date of birth ), while acting as the owner of the assisted living home at which a vulnerable adult resided, failed to provide the vulnerable adult with supervision as NAME wore headphones and stayed on the second floor of the home while the vulnerable adult was on the first floor.	04-20-2023



## No Substantiated Findings

All person(s) had substantiated finding(s), see above.

### Request Summary:

Request Number : C000001431

Date Submitted : 05-10-2024

First Name : Country

Middle Name :

Last Name : Roads

Suffix :

Date of Birth : 07/21/1990

Physical Address : 17 COUNTY ROAD 2054

Apt. :

City : Alpine

State : AZ

Zip : 85290

Fingerprint Clearance Card Application Number : 12345678

Have you lived at your current address for five (5) years or longer? : yes

**Previous Address Information:**None

**Adult Household Member Information:**None

**Child Household Member Information:**None

# ARIZONA

Centralized Background Checks

Exhibit 28: Caregiver Background Check Request – Match Found



Registry Checks have been completed for Test Test for the Department of Child Safety (DCS) and the Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.

### **Department of Child Safety (DCS) Central Registry Check Results**

After conducting a search of the Department of Child Safety (DCS) Central Registry database on the referenced individual, no person(s) submitted for background check has a substantiated finding of child abuse or neglect on the Central Registry database.

Check Completed by: Worker, Test

Date: 04-26-2024

### **Arizona Adult Protective Services (APS) Registry Check Results**

After conducting a search of the Arizona Adult Protective Services (APS) Registry on the referenced individual, no person(s) submitted for background check has a substantiated finding in Arizona of abuse, neglect, or exploitation of a vulnerable adult on the APS Registry.

#### **Request Summary:**

Request Number : I000001338

Date Submitted : 04-26-2024

First Name : Test

Middle Name :

Last Name : Test

Suffix :

Date of Birth : 01/01/1970

Physical Address : 134 Test Road

Apt. :

City : PHOENIX

State : AZ

Zip : 85007

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/Contract Number(s) or Provider ID(s) :

Have you lived at your current address for five (5) years or longer? : no



Previous Name(s) :

First Name: Sue Last Name: Test

Additional Information : test

**Previous Address Information:**

Address 1 :

Address : 1234 Test Road

Apt :

City : Tucson

Country : USA

From : 02/01/2024

To : 03/22/2024



**Exhibit 29: Individual-Personal Background Check Request – No Match Found**



Registry Checks have been completed for Country Roads for the Department of Child Safety (DCS) and the Adult Protective Services (APS). The report also includes the background check request details as provided by the requester.

### Department of Child Safety (DCS) Central Registry Check Results

After conducting a search of the Department of Child Safety (DCS) Central Registry for an Individual/Personal request, the listings below provide all of the substantiated findings associated with the individual named below.

#### Requester Name: Country Roads

Allegation	Allegation Code/ Description	Intake ID #	Disqualifying or Non-Disqualifying	Date Exception Approved
Emotional Abuse	Incident or pattern of behavior directed toward child/ interferes with normal functioning (berating, name calling, targeting, rejection)	IN00026196	Disqualifying	

This notice serves as information purposes only. DCS Central Registry is unable to provide any further information. If the named individual wishes to obtain more details regarding the substantiation, please direct them to the DCS website located at <https://dcs.az.gov/resources/request-dcs-information>. Once on the DCS website, they can find the forms CSO-1036A (-S) in the "Area of Request" "Case File Records, complete the form, and submit as directed on the second page of the form. The named individual can also dispute a report by calling 602-255-2699 and following the prompts.

A Central Registry Exception may be requested by the individual through the Arizona Board of Fingerprinting (AzBOF). Additional information can be found at <https://fingerprint.az.gov>. They can be reached by mail at Arizona Board of Fingerprinting, P.O. Box 6129 - Mail Code 185, Phoenix, AZ 85005 or by phone at (602) 265-0135 or via email at <https://fingerprint.az.gov/central-registry-exception-process>.

Check Completed by: Worker, Test

### Arizona Adult Protective Services (APS) Registry Check Results

The purpose of the APS Registry is to prevent vulnerable adults and children from being victimized by individuals who have been found, through an APS investigation and due process, to have abused, neglected, or exploited a vulnerable adult. Refer to A.R.S. § 46-459.

#### Requester Name, Date of Birth : Country Roads, 07-21-1990

Match Type	Match Details	Findings	Description of Disposition	Date Placed on Registry
Partial Match	Alias Last Name Date Of Birth	Neglect	On or about 2020, NAME (date of birth _____), while acting as the owner of the assisted living home at which a vulnerable adult resided, failed to provide the vulnerable adult with supervision as NAME wore headphones and stayed on the second floor of the home while the vulnerable adult was on the first floor. As a result, NAME would have been unable to hear the vulnerable adult if she needed assistance. Such conduct is prohibited per A.R.S. § 46-451(A)(7).	04-20-2023



**Request Summary:**

Request Number : I000001430

Date Submitted : 05-10-2024

First Name : Country

Middle Name :

Last Name : Roads

Suffix :

Date of Birth : 07/21/1990

Physical Address : 17 COUNTY ROAD 2054

Apt. :

City : Alpine

State : AZ

Zip : 85290

Date Employed :

Fingerprint Clearance Card Application Number :

Solicitation/Contract Number(s) or Provider ID(s) :

Have you lived at your current address for five (5) years or longer? : yes

Additional Information : test

**Previous Address Information:**None



**Exhibit 30: Individual-Personal Background Check Request – Match Found**

