



## Before Getting Started

*The form **MUST** be typed; handwritten checklists will not be accepted and will be returned.*

- **CBI and FBI fingerprints must be initiated prior to submitting this checklist to the CDEC Background Investigation Unit.**
- Information on how to complete each of these checks can be found on the state website from which you are requesting the background check. Each state's child care background check contacts may be found via [this link](#).
- **You must initiate the required criminal history and child abuse and neglect background checks from every state you lived in for the past five years before sending this checklist to the BIU.** If your State Background Check checklist does not include each of the required background check requests and/or responses from every state you have lived in over the past five years, your request will not be processed.
  - If more than 20 days has surpassed without a result from the BIU or specific state, please conduct a written status check with the appropriate state and forward the written communication to our unit for processing.
- This request checklist generates **TWO** results letters. Results are emailed to the primary email address for the person/agency/facility requesting the background check and mailed to the Attention of the person being checked. All persons must retain this letter on file.
- **BIU's review of all submitted materials for state-based checks may take up to 45 days from receipt.** Requests are processed in the order they are received. \*No Fee is required to be submitted to the BIU.
- If you have questions, please call the CDEC Background Investigation Unit at 303.866.5043. This is a monitored voicemail line; calls are returned within two business days. You may also email us at [cdec\\_cbc\\_biu@state.co.us](mailto:cdec_cbc_biu@state.co.us).
- Make a copy of this checklist and all requests and/or results to keep for your files before you submit them. Mail or email your completed checklist and all required documents to: [cdec\\_cbc\\_biu@state.co.us](mailto:cdec_cbc_biu@state.co.us)

Colorado Department of Early Childhood  
Attn: Criminal Background Check  
710 S. Ash Street  
Denver, CO 80246

Due to Federal requirements, applicants who have lived outside of Colorado in the past five years are required to provide the following three background checks for each state they have lived in 1.) State Criminal History Check, 2.) State Sex Offender Registry Check, and 3.) State Child Abuse and Neglect Registry Check.

A State Criminal History Check will not be required for states participating in the National Fingerprint File (NFF) Program. Currently, the following states participate in the NFF Program: Arizona, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Maryland, Michigan, Minnesota, Missouri, Montana, North Carolina, New Jersey, New York, Ohio, Oklahoma, Oregon, Tennessee, Utah, Vermont, West Virginia, and Wyoming. ***\*This information is subject to change.***

For all other previous states of residence, criminal history checks must be requested.

The CDEC Background Investigation Unit will initiate the State-based Sex Offender Registry checks.

**Providers are required to maintain a complete copy of this checklist, all responses/requests, AND a copy of the State-based background check eligibility letter issued by CDEC on-site at the employment location.**

***Incomplete State-Based Background Check Checklist WILL NOT be processed or returned.***



## FOR CDEC BACKGROUND INVESTIGATION UNIT USE ONLY

DATE RECEIVED	PROCESSED DATE	PROCESSED BY	CBC ID
STATES RESIDED	SCH ELIGIBLE      INELIGIBLE	SSOR ELIGIBLE      INELIGIBLE	SCAN ELIGIBLE      INELIGIBLE

<b>Section A: Agency/Facility Information (REQUIRED)</b>			
Agency/Facility Name <i>(requesting the check)</i>		CCCAP <input type="checkbox"/>	CDEC License Number <b>(REQUIRED)</b>
Mailing Address	City	State	Zip Code
Email Address <i>(results are emailed to the primary email address on file)</i>		Phone #	

<b>Section B: Applicant Information (REQUIRED)</b> <span style="float: right;">*optional</span>			
First Name	Middle Name <i>(not initials)</i>	Last Name	* Social Security #
Previous Names <u>Ever</u> Used (including maiden, middle, alias/nickname.) - List ALL. <i>If none, please type "none."</i>			
Date of Birth (MM/DD/YYYY)	Sex (M, F, X)	Race/Ethnicity (White, Black, etc.)	Phone #
<b>Current Address</b>			
Street Address	City	State	Zip Code

<p><b>Have you lived in a state other than Colorado within the <u>past 5 years</u>?</b></p> <p>Yes. If you checked yes, you are <b>REQUIRED</b> to complete sections C, D and E.</p> <p>*Please list the date you moved to Colorado _____</p> <p>No. If you checked no, you are <b>REQUIRED</b> to complete section E and keep this on file. <b><u>DO NOT</u></b> submit this checklist to the background investigation unit.</p>
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## Section C: Previous Residence Information (REQUIRED)

Please list each out of state address you have lived at over the past 5 years and the dates you resided there.

Address #1	
Dates Resided	Street Address, City, State, Zip Code
State	
Have you contacted this state to initiate the following?	
State Criminal History Check YES <input type="checkbox"/> NO <input type="checkbox"/>	State Child Abuse/Neglect Registry Check YES NO
Date Requested: NFF <input type="checkbox"/>	Date Requested:

Address #2	
Dates Resided	Street Address, City, State, Zip Code
State	
Have you contacted this state to initiate the following?	
State Criminal History Check YES <input type="checkbox"/> NO <input type="checkbox"/>	State Child Abuse/Neglect Registry Check YES NO
Date Requested: NFF <input type="checkbox"/>	Date Requested:

Address #3	
Dates Resided	Street Address, City, State, Zip Code
State	
Have you contacted this state to initiate the following?	
State Criminal History Check YES <input type="checkbox"/> NO <input type="checkbox"/>	State Child Abuse/Neglect Registry Check YES NO
Date Requested: NFF <input type="checkbox"/>	Date Requested:

Address #4	
Dates Resided	Street Address, City, State, Zip Code
State	
Have you contacted this state to initiate the following?	
State Criminal History Check YES <input type="checkbox"/> NO <input type="checkbox"/>	State Child Abuse/Neglect Registry Check YES NO
Date Requested: NFF <input type="checkbox"/>	Date Requested:

**Incomplete State-Based Background Check Checklist WILL NOT be processed or returned.**



## Section D: Previous Residence Information Summary (REQUIRED)

Please provide each state you have lived in over the previous 5 years, the dates you lived there and the initiation dates of each required background check for each of those states.

*\*Sex Offender Registry Checks are initiated by the CDEC Background Investigation Unit.*

#	State	Dates Resided	Criminal History Check	Child Abuse and Neglect Registry Check
			Date request was submitted to specific state	Date request was submitted to specific state
EX	MO	1/2015 - 1/2019	1/15/2022	1/15/2022
1				
2				
3				
4				
5				

## Section E: Certification

Please review and check the boxes of each statement below.

### State Criminal History Check(s)

I have attached my State Criminal History Check request and/or results to this checklist

### State Child Abuse and Neglect Registry Check(s)

I have attached my State Child Abuse and Neglect Registry Check request and/or results to this checklist

If I have lived in the state of Georgia in the last 5 years, I authorize the Colorado Department of Early Childhood (CDEC) to request a child abuse and neglect records check on my behalf. (Optional)

**\*Signature Required**

### Proof of follow up in 20 days

I understand if I have not received a response from the respective state(s) or BIU within 20 days, I will provide a written status check from that state and forward the written follow up documentation to the CDEC BIU for review.

By signing below, I authorize the Colorado Department of Early Childhood (CDEC) to complete a search of the State-based sex offender registry. I confirm that the information I provided on this State-based Background Check Checklist is correct and accurate to the best of my ability.

Signature prospective/current staff: \_\_\_\_\_

Date: \_\_\_\_\_

**Incomplete State-Based Background Check Checklist WILL NOT be processed or returned.**