Interstate Background Check Request Form

Federal law requires Child Care and Development Fund (CCDF) Lead Agencies to conduct interstate background checks for prospective child care staff who have lived in other states in the past 5 years and to respond to these requests as expeditiously as possible (42 USC § 9857).

Please complete Section 2-3 and sign and date at the bottom.

Section 1 Requesting Agency Name and Address				
Requesting CCDF Lead Agency: Office of Licensing & Accreditation				
Address: 700 Governors Drive	City: Pierre	State: SD	Zip Code: 57501	
Name of Agency Contact: Kyli Hill			Agency Contact Email: DSSCRS@state.sd.us	

Section 2 Subject of Background Check Request – *include a copy of your driver's license*				
Legal Name, First:	Middle:	Last:	Maiden Name:	Alias (First and Last Name):
Social Security #: ___-__-____	Date of birth: mm/dd/yyyy	Race and/or Ethnicity (Select All That Apply): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Hispanic or Latino ☐ Middle Eastern or North African ☐ Native Hawaiian or Pacific Islander ☐ White Sex: ☐ Female ☐ Male ☐ A Different Term Hair Color: Height: Weight: Eye Color:		
Current Address:		City:	State:	Zip Code:
Place of Birth (City and State):				
Applicant personal email address: Click or tap here to enter text.				

Section 3 List All Address(es) lived in the State of Louisiana					
Number and Street:	City:	State:	Zip Code:	Beginning Date: mm/yyyy	Ending Date: mm/yyyy

☒ **The subject of this request has given consent to the CCDF Lead Agency to release information in accordance with CCDF Rule 45 CFR Part 98.**

Subject Signature: _____ Date Signed:_____