Instructions to complete the CPS Background Clearance Request Form

DHR/SSA 1279 (03/2017 edition)

(The following must be completed and submitted to the local CPS office by all new employees within 3 days of reporting to work.)

1. Visit the Maryland Department of Human Services website: [www.dhr.maryland.gov/child-protective-services/background-search/](http://www.dhr.maryland.gov/child-protective-services/background-search/).
2. Scroll down the left column on the page and click on the words: *Request a Background Check*
3. Two green boxes appear. Click on the lower box marked *Other Individuals*.
4. Two choices appear. Click on the .pdf form entitled: *Child Protective Services Background Form (DHR/SSA1279A)* and open the form (this is a fillable form).
5. On the top left, *Part 1, Purpose of Search, A. Release to Self.* click on #1: T*o determine if I have been found responsible for an “indicated” or “unsubstantiated” disposition for a child abuse or neglect investigation.*
6. For Part I, Section *B. Release to an Agency/Individual Related To:* Indicate your place of employment (for a School, click on the box: *School Personnel;* for a parish, click on the box next to the words: *Other (Specify)* and type in the word “Church”*.*)
7. In the box requesting *Agency/Individual Name*, enter the name of your employer (school or parish).
8. In the box requesting *Name of Agency Representative*, enter the name of the principal or pastor at your work site.
9. In the box requesting *Agency Address*, enter the street address of your parish office or school.
10. In the box requesting *Representative’s Phone Number*, enter in the pastor’s or principal’s work phone number.
11. In the box requesting *Representative’s Email,* enter the work email address for the pastor or principal.
12. In Part II of the form, *Search Information*, enter your personal information in the boxes listed *Applicant’s Last Name, First Name, Middle Name, Maiden/Birth Name, Social Security Number, Date of Birth, Sex, Race and Other Names Used.* The boxes that follow will require your *home address, country you reside in, daytime telephone number, and personal email address.*
13. The boxes below will require your Current Spouse’s full name and date of birth (if applicable) and any child/children’s full name/s and date/s of birth (if applicable).
14. At the very bottom of the form, answer the questions by clicking on the boxes *Yes* or *No*: *Have you lived in Maryland in the past?* *Have you worked or volunteered in Maryland in the* *past?* This is followed by entering the years you have lived, worked or volunteered in Maryland next to the words: *If yes to either question, from what years.*
15. On page 2 of the form, enter any other home addresses where you resided within the past seven years in Maryland.
16. Part III of the form is an authorization statement related to the background check, please read that statement and then print out the form.
17. Part IV of the form is the section that **must be completed in the presence of a Notary Public. Do Not sign this form until you are in the presence of a Notary Public.**  When you meet with a Notary, you will sign in the *Signature* box and date the form, and then print your name in the box below your signature and print the date. The Notary Public will complete Part V of the form and return it to you. The Notary may charge you a fee which is reimbursable from your parish or school.
18. Do not complete Part VI of the Form. This is completed by the local CPS office.
19. Mail the notarized form to the Department of Social Services (DSS) in the city/county where you reside. A list of the local DSS offices and addresses can be found by clicking on the Maryland Department of Human Services website link entitled *List of Agencies*. If you do not reside in Maryland, mail your notarized form to: Maryland Department of Human Services, Social Services Administration, In-Home Services, 311 W. Saratoga Street, Room 553, Baltimore, MD 21201.
20. The background clearance findings will be sent to the principal or pastor, normally 30 days after receipt, and is to be filed with the employee personnel file. Negative findings from CPS will be communicated to the pastor or principal, who will work with the AOB Office of Child and Youth Protection.
21. If you have any questions or concerns regarding this procedure, please contact Human Resources for assistance: 410-547-5432.