AUTHORIZATION FOR CHILD ABUSE REGISTRY CHECK

The State of Oregon Department of Human Services Child Welfare maintains a central state registry regarding child abuse/neglect investigations and the results of those inquiries, even if the cause remains unknown. The release of these records to CASA is included in ORS 419B.035. As a part of the screening of all CASA volunteer applicants, CASA of Linn County, Inc. will check the registry for information regarding the applicant and any reported child abuse/neglect investigations.

NAME: _____
(Last) (First) (Middle)

Other Names You Have Used: _____

Social Security Number: _____ Date of Birth: _____

Place of Birth: _____

Current Address: _____

If not at this address for past five years, please indicate all other addresses: _____

_____

_____

Have you ever been the subject of a child abuse/neglect investigation in Oregon or any other state? _____

If yes, please explain: _____

_____

_____

_____

_____

In signing, I verify that the information provided herein is true and complete to the best of my knowledge. I further understand that any misrepresentation on this form, will be cause for disqualification of my application or dismissal from my volunteer work.

Signature: _____ Date: _____