

**State of Nevada - Division of Child and Family Services
REQUEST FOR CHILD ABUSE AND NEGLECT SCREENING**

Information about substantiated child abuse and neglect reports in the Central Registry may be requested in accordance with NRS 432.100. Information about whether the person who is subject of the background check has been found to have abused or neglected a child may be made available to designated individuals whose primary concern is child safety (e.g. law enforcement, corrections, child welfare agencies, licensed child placing agencies). This request will NOT provide child protective services (CPS) reports or investigative history pursuant to the parameters contained within NRS 432.100.

To request CPS history within the confines of NRS 432B.290, contact the appropriate child welfare agency where the family/person who is subject of the background check resided in Nevada. If it is not known where the family/person resided in Nevada, please proceed with this request form and if any record of the person is found, you will be notified of the appropriate child welfare agency to contact.

Clark County (Las Vegas/Henderson): https://www.clarkcountynv.gov/residents/family_services/request_records.php

Washoe County (Reno/Sparks): (775) 785-8600

All other counties in Nevada: (775) 684-1930

Instructions: Complete this request form in its entirety. Email the form to DCFS-CANS@dcfs.nv.gov

You will receive a response identifying whether a record was found of substantiated child abuse or neglect. If the family/person has CPS history, you may contact the appropriate child welfare agency to request additional information pursuant to the statutory allowances within NRS 432B.290.

If you do not receive a response after 15 business days, please contact DCFS-CANS@dcfs.nv.gov or (775) 684-7941.

Requestor Information

Name/Title/Agency: _____
Agency's Address: _____
Phone Number: _____ Email _____
Release of information related to: Foster parent licensing Adoption Kinship care provider
Law Enforcement Child Welfare CASA
Other (explain): _____

Person subject of background check (Include all household members over the age of 18)

Name Alias/Maiden Name(s) Date of Birth Social Security Number

Children in family or home

Name Alias/Maiden Name(s) Date of Birth Social Security Number

Signature and Notary

**Notary must verify requestor is employee of agency that requestor selected above (e.g. through Employee Photo ID, business card, etc.)*

Print Name (Adult #1) Signature Date
Print Name (Adult #2) Signature Date
STATE OF _____)
COUNTY OF _____)
This instrument was acknowledged before me on (date) by:
Printed Name of Individual
(Notary Stamp) Notary Public

(FOR DCFS CENTRAL OFFICE USE ONLY)

- No Record Found
- Central Registry Record Found:
A report of ABUSE and/or NEGLECT was substantiated on _____.
- CPS Record Found (to request additional information please contact):
 - Clark County Department of Family Services https://www.clarkcountynv.gov/residents/family_services/request_records.php
 - Washoe County Human Services Agency (775) 785-8600
 - Division of Child and Family Services (775) 684-1930

Print Name/Title Signature Date