

Authorization to Complete an Abuse and Neglect Check

I, _____, parent/legal guardian of _____, authorize the Division of Child Care (DCC) to complete a Child Abuse and Neglect (CA/N) check on my child. I waive any right to claim the request is an invasion of privacy as it is made with my consent. I release DCC from any liability regarding the release of any abuse and neglect information gathered in this background check.

Parent/Legal Guardian Signature

Date