Submitting an In-State Application

In-state applications can only be requested for current Washington State residents. Before starting the application, please make sure the Signature Form is completed and uploaded to your computer. It will need to be uploaded in Step 3 of the application wizard.

1. Login to the Background Check Portal (BCP): <u>https://apps.dcyf.wa.gov/BackgroundCheckPortal/Welcome</u>. For best results, use Google Chrome browser.



2. The BCP homepage will appear (*Figure 1*). If you have any pending orders, the Pending Order screen will appear instead (*Figure 2*). Click on the Applications menu at the top, and click "View Application Page" to return to the homepage.





Original Date: April 7, 2021 Eligibility & Provider Supports Division | Approved for Distribution by Jin Kim, Background Checks Supervisor **3.** Click on the Signature Form link to access the signature form. Have the subject sign (electronic signatures are not accepted) and date the form and upload it to your computer.

| Applications | | | | |
|--|--|--|--|--|
| Washington State Child Abuse & Neglect Founded Findings Reques | t (CA/N) | | | |
| Please select type of CA/N check request below: | | | | |
| In-State 🜒 | | | | |
| CPS Investigation – Out of State 🟮 | | | | |
| Non-CPS Investigation – Out of State 🕄 | | | | |
| In-State and Non-CPS Investigation requests require a Subject's signative. The signature form must be completed and uploaded on Step 3 of the application prior to starting a request. | | | | |
| Authorization By Subject o | f Records Requested | | | |
| By signing below, I authorize the State of Washington De release my confidential information about the existence | | | | |
| to the requesting individual agency or organization ider | ntified on the Child Abuse and general glect Founded | | | |
| Findings Request. | | | | |
| SUBJECT'S SIGNATURE | DATE SIGNED | | | |
| | | | | |
| DCYF CA/N Signature Authorization (03/2020) | | | | |

4. Choose the "In-State" application.

| pplications | |
|--|--|
| Washington State Child Abuse & Neglect Founded Findings Request (CA/N) | |
| Please select type of CA/N check request below: n-State 0 CPS Investigation – Out of State 0 Non-CPS Investigation – Out of State 0 n-State and Non-CPS Investigation requests require a Subject's signature. The signature form must be completed and uploaded on Step 3 of the application prior to submitting. Please print and complete the signature form prior to starting a request. | |
| | |

- 5. Step 1 screen:
 - a. Fill out the Requestor Information screen. The system will not allow you to proceed if a required field is left blank.
 - b. Requestor's primary and secondary email address: For requestors that use a shared group email, enter your individual email in the primary email address field and the group email in the secondary email address field. Both emails will receive the confirmation and result emails.
 - c. Click "Next" when you are ready to proceed.

| Requestor Information | Subject In | | maton | Upload Signatures & Submit |
|--|-------------------------------------|------------------------------|-------------------------|-------------------------------------|
| Requestor Information | | | | |
| Please fill out the following informat | ion for the person w | ho is requesting info | ormation about Child Al | buse & Neglect founded findings. |
| Requestor First Name | stor First Name Requestor Last Name | | Requestor Job Title | Name of Requesting Agency or Entity |
| | | | Optional | |
| Democratics Defenses Freedland | Requ | estor Phone | Extension | Requestor Fax Number |
| Requestor Primary Email Address | nequ | | | |
| Requestor Primary Email Address email@email.com Requestor Secondary Email Address email@email.com | فر | (360) 555-1212 | 1234 | Optional |
| email@email.com Requestor Secondary Email Address email@email.com | فر | | 1234 | Optional |
| email@email.com Requestor Secondary Email Address | فر | (360) 555-1212 | City | Optional |
| email@email.com Requestor Secondary Email Address email@email.com Requestor Mailing Address | فر | (360) 555-1212 | | |
| email@email.com Requestor Secondary Email Address email@email.com Requestor Mailing Address | فر | (360) 555-1212 | | State |

- 6. Step 2 screen:
 - a. Fill out the Subject Information screen. The system will not allow you to proceed if a required field is left blank.
 - b. Please ensure you are entering the subject's date of birth in complete mm/dd/yyyy format.
 - c. If the subject does not have a middle name or social security number (or did not provide one), please enter none as noted in those fields.
 - d. Click on the blue "Click here to add Former Name" button to enter any alias names.
 - e. Click "Next" when you are ready to proceed.

| Requestor In | | | |
|---|---|---|--|
| | ntormation | Subject Information | Upload Signatures & Submit |
| Subject Information | 1 | | |
| Please fill out the followi findings. | ing information for the p | erson that is the subject of the inform | nation requested about Child Abuse & Neglect founded |
| Subject First Name | | Subject Middle Name | Subject Last Name |
| | | If no middle name enter 'none' | |
| Subject Date of Birth | Gender | Social Security Number | Purpose of the Request |
| mm/dd/yyyy | Select one 🗸 🗸 | ***-##-#### | Select one 🗸 |
| | | If no social security number enter 'none' | |
| Subject Current Add | iress | | |
| _ | | City | State Washington |
| Mailing Address 1 Mailing Address 2 Suite #, Apt # | | City Zip | |
| Mailing Address 2 Suite #, Apt # Subject Previous Na Provide any other name: | umes Used (AKA, Alia s the subject has used or known by any other nam | Zip Ses or Maiden) was known to use. | |
| Mailing Address 2 Suite #, Apt # Subject Previous Na Provide any other name: | s the subject has used or | ses or Maiden) was known to use. es or aliases. | Washington • |

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- 7. Step 3 screen:
 - a. Upload the subject's signed and dated signature form by clicking the "Choose Files" button.
 - b. Click "Done" when you are ready to proceed.

| In-State Child Abuse & Neglect Founded Finding Request The information provided through this service is limited to the existence of founded findings (substantiated findings) of allegations of child abuse and neglect, and complies with the Adam Walsh Child Protection and Safety Act, the Child Care and Development Block Grant Act and the Family First Preventic | | | |
|--|---|---|--|
| rvices Act. | | | |
| 1 | 2 | 3 | |
| Requestor Information | Subject Information | Upload Signatures & Submit | |
| Upload Signature | | | |
| Please print the signature form, have the subject s | ign it and take a picture or scan the document an | d save to your computer, then do the following: | |
| Select the "Choose Files" button to attach your | document. | | |
| File size is limited to 10MB | | | |
| File type must be one of the following: D | OC, DOCX, JPG, PNG, or PDF | | |
| Choose Files | | | |
| | | ′ | |
| | | | |

- 8. A Request Submission pop-up box will appear:
 - a. If there are no other applications that need to be submitted with this order, choose "I'm Finished Review Order."
 - i. You will be taken to the Pending Order Screen to review your request before submitting it.
 - b. If you need to submit more applications with this order, choose "I have more to submit."
 - i. You will be taken back to Step 1 to start a new application.
 - c. If you need to go back and edit or review this application, choose "Continue working on this request."



- **9.** Once the "I'm Finished Review Order" button is clicked, the Pending Order screen will appear. Locate your request/order and click the "Submit Order" button to submit your request.
 - a. The print icon can be clicked to view a PDF version of the application.
 - b. Click the "Edit" button if you need to make any changes to the application before submitting.
 - c. Click the "Delete" button to delete the application if entered by mistake.

| vasnington State | Child Abuse & Neglect Fo | ounded Findings Requ | est (CA/N) | | | |
|-----------------------|--|----------------------|---------------------------|------|--------|-------------------------------|
| elete for an individu |) have not been submitted. All al request to make changes. Se 28 Last Saved: 3/26/2021 | | I applications are comple | | | select edit or ubmit Order |
| | | | | | | |
| First Name | Middle Name | Last Name | Status | Edit | Delete | Print |

10. A confirmation email will be sent immediately to the primary and secondary email addresses entered.

| From: | CANHistoryChecks@dcyf.wa.gov | | | |
|---|---------------------------------------|--|--|--|
| To: | | | | |
| Subject: | In-State CA/N Submission Confirmation | | | |
| Subject. | In state CAM Submission Committation | | | |
| Date: | Tuesday, February 23, 2021 2:07:42 PM | | | |
| | | | | |
| Dear , | | | | |
| A request for a CA/N History Electronic Check(s) (CHEC) has been submitted on your behalf | | | | |
| You can expect an email with the results in 7 to 10 <u>business days</u> . Please wait 10 business days before you inquire about the status of your request. | | | | |
| Questions regarding your CHEC request should be directed to the CA/N History Electronic Check Unit at <u>CANhistorychecks@dcyf.wa.gov</u> or by calling 1-800-998-3898. | | | | |
| Requesting A | Agency/Entity: DCYF | | | |
| Order #: 9 | Order Date: 2/23/2021 | | | |
| Request ID | Subject Name | | | |
| 650019 | Scrooge McDuck | | | |

11. To check on the status of your request, click the "Request Status" button at the top of the screen.



a. Using the search tool, use any of the available fields to search for the specific request you are looking for. Alternatively, you can input a date range to search for all requests made within a specific time period or click the search button with none of the fields entered to view a list of every request you have made.

| Request Status | | | | |
|------------------------------------|-------------------------------------|--------------|--|--|
| Request Type | Request Status | Order Number | | |
| Request Date Range From mm/dd/yyyy | Request Date Range To mm/dd/yyyy | Request ID | | |
| Subject First Name | Subject Last Name | | | |
| Search | | | | |

b. The status of a request will be listed in the "Request Status" column.



- i. **Submitted Awaiting Payment**: Request was submitted but payment has not been received.
- ii. Submitted Pending Review: Request was submitted and is in our queue to process.
- iii. **Order Not Submitted**: Request was entered into the system but has not been submitted. These requests will be sitting in your "Pending Orders" screen.
- iv. Withdrawn Payment Not Received: Request was withdrawn and archived due to nonpayment.
- v. Complete Application: Request was completed and results were issued.
- vi. **Incomplete Application**: Request was partially entered but has not been completed or submitted.
- **12.** Once your order is processed, the result email will be sent to the primary and secondary email addresses entered.
 - a. Please do not submit duplicate requests as this may delay the processing of your request. To check on the status of your request, please use the system's built-in status checking tool or email our unit at <u>CANhistorychecks@dcyf.wa.gov</u> or call 1-800-998-3898, option 1.