



# WASHOE COUNTY

## HUMAN SERVICES AGENCY

350 S. CENTER STREET  
RENO, NEVADA 89501  
PHONE: (775) 337-4470  
FAX: (775) 337-4495

### Child Care Licensing Background Process

Please review the following process for ALL employees. Failure to complete any steps may result in a delay or non-issuance of clearance. Staff must work under direct supervision until a final memo of eligibility is issued.

<p><b>STEP 1</b></p> <p>Complete <a href="#">Consent and Release Form</a> and <a href="#">Personal Data Sheet</a>.</p> <ul style="list-style-type: none"><li>• Applicant and Owner/Director must sign third page of Consent and Release.</li><li>• Employees under age 18 must have Consent and Release signed by parent/guardian.</li><li>• Please complete electronically or print to ensure legibility.</li><li>• Incomplete forms will not be accepted and facility director will be notified of the missing information.</li></ul>	<p><b>STEP 4</b></p> <p>Submit copy of your fingerprint receipt to your employer as temporary authorization to work under supervision pending background results. You cannot work, even under supervision, until your employer has verification that you started the background process.</p>
<p><b>STEP 2</b></p> <p>Visit an approved fingerprinting business or agency that can run <b>Live Scan</b> fingerprints. A current list is included with the Child Care Licensing Provider Background Check Process attached. <b>Washoe County Sheriff's Office does not run Live Scan at this time.</b></p> <p>You will need to bring:</p> <ol style="list-style-type: none"><li>1. Completed consent and release form. <b>Make sure the fingerprinting business signs the third page of your consent and release!</b></li><li>2. Provider Background Check Process sheet. This form has the necessary account numbers to submit your prints via live scan. <b>You may need to remind the fingerprint technician that you need your prints submitted electronically.</b></li><li>3. Payment. Fingerprint fees vary by location (typically \$30+) and will be collected at the time of fingerprinting. Please call the fingerprint business to verify their individual fees. Please expect to pay <b>\$40.25</b> via debit or credit card <u>in addition</u> to the fee to roll fingerprints.</li></ol>	<p><b>STEP 5</b></p> <p>If you have lived out of Nevada within the previous 5 years while over age 18, you <b>MUST</b> obtain, from each state you resided in within the previous 5 years, the appropriate:</p> <ol style="list-style-type: none"><li>1. Child Abuse and Neglect Registry results, <b>and</b></li><li>2. Criminal History records</li></ol> <p>This step must be completed within <b>90 days</b>. Once complete, provide the results and any supporting documents to Washoe County Child Care Licensing in person or via email.</p> <p>A link to a list of most state agencies is: <a href="https://childcareta.acf.hhs.gov/sites/default/files/public/child_care_subsidy_cbc_state_contacts_9-12.pdf">https://childcareta.acf.hhs.gov/sites/default/files/public/child_care_subsidy_cbc_state_contacts_9-12.pdf</a></p> <p><b>Please note, your memo of eligibility may be revoked if this step is not completed.</b></p>
<p><b>STEP 3</b></p> <p>Deliver or email the following items:</p> <ul style="list-style-type: none"><li>• Fingerprint Receipt</li><li>• Consent and Release Form, signed by center director and fingerprinting agency staff</li><li>• Complete Personal Data Sheet</li><li>• State-issued identification card or photo copy of identification card. <b>Student ID cards or expired forms of ID cannot be accepted.</b></li></ul> <p>to: Washoe County Human Services Agency 350 S. Center St., 1<sup>st</sup> Floor 9:00am-4:00pm 775-337-4470 <a href="mailto:HSA-pdsforms@washoecounty.gov">HSA-pdsforms@washoecounty.gov</a></p> <p>A payment of <b>\$11.50</b> is required at the time documents are submitted. Payments are accepted via credit card or e-check. Money orders for this fee are no longer accepted.</p> <p><b>If emailing your documents, please submit them prior to calling to make your payment over the phone.</b></p>	<p><b>STEP 6</b></p> <p>Once background check is complete, an eligibility memo will be sent to your email and directly to your employer confirming your work status. The Memo of Eligibility must be received before employees 18 years and older can begin working without direct supervision.</p> <p>Although fingerprints are good for 5 years, eligibility memos are provider specific. Therefore, a new Consent and Release Form (and an additional \$11.50 fee) is required each time a caregiver changes employers.</p> <p><b>Please refer questions regarding background check status or appeals to State Child Care Licensing at 702-486-3822 or via email at <a href="mailto:dpbhccibackgrounds@health.nv.gov">dpbhccibackgrounds@health.nv.gov</a></b></p>

Joe Lombardo  
Governor

Richard Whitley, MS  
Director



DEPARTMENT OF  
HEALTH AND HUMAN SERVICES  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

## CONSENT AND RELEASE FORM FOR FINGERPRINTING AND CRIMINAL HISTORY REVIEW

A clearance cannot be issued without this form. **You must complete this form when originally hired and when changing child care facilities, being rehired or obtaining a new background check.** Your original background check should take place in the jurisdiction where you will be employed. A valid childcare work card issued by one jurisdiction may be valid in another jurisdiction without another background check (please consult with law enforcement where you will be employed or call Child Care Licensing). Child Care Licensing requires a new background check every five years.

As an actively participating provider within subsidy programs you are required to complete this form and the processes that follow.

I, \_\_\_\_\_, understand that as an employee, applicant, licensee, or resident of \_\_\_\_\_ (FACILITY NAME) and/or applicant or registrant for \_\_\_\_\_ (SUBSIDY PROGRAM),

I am required to be fingerprinted and to undergo a criminal record review pursuant to NRS 432A.175. NAC 432A.200(4)(a) requires fingerprinting be completed and submitted within **24 hours after date of hire, or date of registration if you are a subsidy provider, and every 5 years thereafter.** I do hereby consent to be fingerprinted and agree to the following conditions and terms:

1. The fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), the Nevada Criminal History Repository, and the Child Abuse and Neglect System (CANS).
2. I hereby authorize the FBI, the National Sex Offender Repository, Nevada Criminal History Repository, and/or other local/national law enforcement agencies and Child Protective Services agencies to release criminal history information and CANS history to Child Care Licensing.
3. All information provided to Child Care Licensing is confidential, as relating to a third party or entity.
4. I hereby authorize the Nevada Criminal History Repository to retain a fingerprint card in the central repository's master file for the sole purpose of identifying same against subsequent disqualifying criminal arrest and I authorize the Nevada Criminal History Repository to release criminal history information to Child Care Licensing in accordance with dissemination restrictions as provided for in the Nevada Revised Statutes.
5. I may be suspended, terminated, or disqualified from employment/FFN participation, and/or licensure based on the findings of the criminal record review consistent with applicable laws and regulations or on the findings of the Child Abuse and Neglect System.
6. I understand that I may review the challenge the accuracy of any and all criminal history records which are returned to the submitting agency, and that the proper forms and procedures will be furnished to me by the Nevada Department of Public Safety Records Bureau upon request.
7. This waiver and its authority is valid until such time as the applicant is no longer licensed and/or employed at a child care facility.
8. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions, or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

Name of child care facility (where applying/employed) or subsidy program:

Telephone number at the above facility:

Facility/subsidy program physical address:

Street

City

State

ZIP Code

Name of Nevada child care facility where you worked previously

Last date worked at facility

Your name:

Last

First

Middle

Maiden name, nickname, and other names used:

Your position at the above facility and/or subsidy program is (please check): ☐ Owner ☐ Director ☐ Staff Member (title):

☐ Cook ☐ Driver ☐ Resident ☐ Volunteer ☐ Subsidy Provider ☐ Other (position)

Do you have any scars, marks or tattoos? (If yes, give location and description):

Social Security number:

Have you resided in Nevada for the last 5 years? ☐ Yes ☐ No

If "no" to the above, list the states where you have resided:

If you have not resided in Nevada for the past 5 years you will be required to obtain your Criminal History and Child Abuse and Neglect report from the State in which you resided within 90 days of hire.

Are you a U.S. Citizen?

☐ Yes ☐ No

If not a U.S. citizen, what is your citizenship?

Street address:

Street

City

State

ZIP Code

Mailing address:

Street

City

State

ZIP Code

Home telephone:

Cell phone:

Eyes:

Hair:

Height:

Weight:

Race:

Sex:

Birth date:

Birthplace:

This form must be complete and accurate. Failure to comply may result in a rejected application.

**1. Have you ever had a substantiation (validation) of child abuse and neglect?**

Yes ☐ No ☐

If yes, explain: \_\_\_\_\_

\_\_\_\_\_ Date of charge: \_\_\_\_\_

**2. Do you have pending charges/warrants against you?**

Yes ☐ No ☐ Dates of charges/warrants: \_\_\_\_\_

If yes, explain: \_\_\_\_\_

**3. Check any of the following which apply, past or present (if additional space is needed use the back of this page):**

**Conviction(s):** Yes ☐ No ☐ Date of conviction: \_\_\_\_\_

**Arrest(s):** Yes ☐ No ☐ Date of arrest: \_\_\_\_\_

**Charge(s):** Yes ☐ No ☐ Date of charge: \_\_\_\_\_

**Citation(s):** Yes ☐ No ☐ Date of citation: \_\_\_\_\_

**Reference NRS432.170 – Convictions which may prevent employment in child care. List all arrests, including other states, even if the charges were dropped or dismissed. Please attach a separate page if extra space is needed.**

DATE	CHARGE	ARRESTING AGENCY	CITY/STATE	DISPOSITION

I do hereby agree to the above stated conditions and terms and certify that the above information is true and correct.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Applicant*

☐ Hire ☐ Rehire ☐ Renewal ☐ FFN

My signature below indicates that I have reviewed the arrests shown above, if any.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

My signature below indicates that I have reviewed the arrests shown above, if any.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Director/Owner/FFN Representative*

**Please take this form with you when getting fingerprinted.**

FINGERPRINTING AGENCY: \_\_\_\_\_

**Witness:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Signature of Official Taking Prints*

Fingerprinting must be completed and submitted within **24 hours of hire and every 5 years thereafter**. Make a copy of this form for your records and return the completed forms to the facility in order to be uploaded into the Nevada Automated Backgrounds System (NABS), which can be accessed at <https://ccbgcheck.nv.gov/bcs>.

**\*Do not send fingerprint cards or money orders to Child Care Licensing.  
They will be returned, which can delay the process\***

3811 Charleston Blvd., Suite 210 • Las Vegas, Nevada 89102  
702-486-3822 • Fax 702-486-6660 • dpbh.nv.gov



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## HUMAN SERVICES AGENCY

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RENO, NEVADA 89501  
PHONE: (775) 337-4470  
FAX: (775) 337-4495

### EMPLOYEE PERSONAL DATA SHEET

Each new employee must complete all areas of this form WITHIN 24 HOURS of commencing work. Employee should deliver this form attached to completed Consent and Release to Washoe County Human Services Agency at 350 S. Center St., 1<sup>st</sup> Floor.

This form can also be emailed to [hsa-pdsforms@washoecounty.gov](mailto:hsa-pdsforms@washoecounty.gov)

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Employee Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Maiden Name and any other names/aliases: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Employee Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employee Phone: \_\_\_\_\_ Employee Email: \_\_\_\_\_

Employee New to Child Care? ☐ No ☐ Yes Current Eligibility Memo? ☐ No ☐ Yes - Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Fingerprinted: \_\_\_\_/\_\_\_\_/\_\_\_\_ TB Test Expiration: \_\_\_\_/\_\_\_\_/\_\_\_\_

Previous child care employment - list names of facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

## Provider Background Check Process

**All employees of a child care facility must be fingerprinted.**

**STEP 1:** Complete [Background Check Consent and Release Form](#). Applicant and Owner/Director must sign third page of document. Incomplete forms will not be accepted and will be returned. (**Employees under 18 must have consent and release signed by parent/guardian.**)

**STEP 2:** Take your [Background Check Consent and Release Form](#) and the following information to your local fingerprinting agency (fingerprint cards and/or live scan accepted):

- ORI = **NVBGA000Z**
- MNU# = **152755**
- REASON FOR PRINTING CODE = **CCDBGA**

### **\*\*\* Listing of Local Fingerprinting Agencies Attached\*\*\***

**STEP 3:** Ensure fingerprint agency signs the [Background Check Consent and Release Form](#) on third page of the document.

**STEP 4:** Payments made directly to fingerprinting agencies and Nevada Department of Public Safety can vary. Contact your local fingerprinting agency for payment information. Failure to ensure that NDPS receives payment could result in delay of processing that could affect employment.

**STEP 5:** Ensure fingerprinting agency sends the live scan, rolled or completed fingerprint card to the Nevada Department of Public Safety (NDPS) with payment:

Nevada Department of Public Safety  
Criminal History Repository  
333 West Nye Lane, Suite 100  
Carson City, NV 89706

**STEP 6:** Once reports are received and assessed for determination, Child Care Licensing will update the applicant's information within the facilities NABS account.

**\* Please allow up to 90 days for account information to be processed and updated. \***

89301	<p>Ely Drug Testing &amp; Fingerprinting  1665 Avenue F, Ste A  Ely NV 89301  775-296-1304  No appointment needed  <b>Currently submitting electronically to DPS</b></p>
89502	<p>Martin Ross &amp; Associates  350 South Rock Blvd #200  Reno NV 89502  775-336-4440 must make an appointment.  <a href="http://www.martinrosssecurity.com">www.martinrosssecurity.com</a>  <b>Currently submitting electronically to DPS</b></p>
89502	<p>Fingerprinting Express  5000 Smithridge Dr Ste A-9  Reno, NV 89502  775-322-5587  Mon-Fri 9am-6pm  Sat 10am-3pm  Accepting walk-ins and appointments  Mobile services available by appointment  <a href="http://www.fingerprinitingexpress.com">www.fingerprinitingexpress.com</a>  <b>Currently submitting electronically to DPS</b></p>
89503	<p>The UPS Store #3120  10580 N. McCarran Blvd #115  Reno NV 89503  775-746-3988  <a href="http://www.theupsstorelocal.com/3120">www.theupsstorelocal.com/3120</a>  <b>Currently submitting electronically to DPS</b></p>
89509	<p>Fieldprint – The Computer Guy (Reno)  1185 California Avenue  Reno, NV 89509  877-614-4364  Hours: M-F 9:30am – 5:30pm; Sat 10:30am – 3:30pm  Website: <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a>  Appointment required.  Please visit <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a> to schedule an appointment.  <b>Currently submitting electronically to DPS</b></p>
89521	<p>Fieldprint – The UPS Store #4290 (Reno)  59 Damonte Ranch Parkway  Reno, NV 89521  877-614-4364  Hours: M-F 8:00am – 6:30pm; Sat 9:00am – 4:30pm  Website: <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a>  Appointment required.  Please visit <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a> to schedule an appointment.  <b>Currently submitting electronically to DPS</b></p>

89521	<p>The UPS Store #4290  59 Damonte Ranch Pkwy #B  Reno NV 89521  775-852-3777  <a href="https://reno-nv-4290.theupsstorelocal.com/">https://reno-nv-4290.theupsstorelocal.com/</a>  <b>Currently submitting electronically to DPS</b></p>
89521	<p>Quick Prints Inc  8670 Technology Way  Reno NV 89521  775-682-3535  <b>Currently submitting electronically to DPS</b></p>
89705	<p>Fieldprint – The UPS Store #4959 (Carson City)  963 Topsy Lane  Carson City, NV 89705  877-614-4364  Hours: M-F 9:00am – 5:30pm; Sat 9:30am – 3:30pm.  Website: <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a>  Appointment required.  Please visit <a href="https://FieldprintNevada.com">https://FieldprintNevada.com</a> to schedule an appointment.  <b>Currently submitting electronically to DPS</b></p>
89801	<p>A-1 Alcohol &amp; Drug Collection  1098 Lamoille Hwy Ste 5  Elko NV 89801  775-738-6973  <a href="http://www.a1alcoholanddrugtesting.com">www.a1alcoholanddrugtesting.com</a>  <b>Currently submitting electronically to DPS</b></p>