

Instructions for completing the Central Registry Check – Child Abuse or Neglect Check (CAN)

Print the directions for completing the Child Abuse or Neglect Check form and review carefully.

A copy of your photo id, social security card or birth certificate along with their DPP 156 central registry check is required. Please make sure copies are light enough to view all identifying information. These documents are used to verify your identity. This requirement is listed on the DPP 156 central registry form. Also, please make sure the form is filled out completely before submitting to your instructor. See instructions/reminders below.

Parents/guardians of all applicants under the age of 18 are required to complete and sign a consent giving the Cabinet for Health and Family Services, Records Management Section consent to process the DPP 156 central registry check on their child. Parents/guardians need to submit a copy of their photo id along with the consent. Use the Parent/Guardian Authorization Form provided at the following link:

<http://www.murraystate.edu/academics/CollegesDepartments/CollegeOfEducationandHumanServices/coecenters/TeacherEducationServices/ParentGuardianAuthorizationFormForCANcheck.pdf>

Instructions for completing the DPP 156 form

Make sure you use the DPP 156 central registry check form located at:

<https://www.murraystate.edu/academics/CollegesDepartments/CollegeOfEducationandHumanServices/coecenters/TeacherEducationServices/CentralRegistryCheck.pdf>

Should you make a mistake, do not cross out items or make erasure marks; you should simply start a new form. Use black or blue ink to complete the form.

On page 1:

The top section of the form has been completed for you.

In the Personal Information section, print legibly your first name, middle name, last name, and any maiden names or nicknames. List your Sex, Race, Date of Birth, and full Social Security number. If you do not have a social security number, please write "No social security number" on the appropriate line.

Leave the Date of Initial Hire BLANK.

List your present street address, city, state and zip code. List your previous addresses for the last five years. Be sure to include all addresses. DO NOT abbreviate the city (example Lexington as Lex, Louisville as Lou). If there is not sufficient room for listing all of your previous addresses, you should use another piece of paper.

On page 2:

Read all statements above the signature line carefully. Sign your full name legibly using blue or black ink. List the date you signed the form in front of a witness. Your witness must also sign his/her name legibly and date in blue or black ink. The date you signed the form must be the same date as the date your witness signed it.

Do not alter or fill in the remaining part of the form. **The Results of Child Abuse or Neglect Check** portion is for official use only; leave it blank.

Make a photocopy of your driver's license, Social Security card, or birth certificate. Include the copies with a check or money order made payable to the Kentucky State Treasurer in the amount of ten dollars (\$10.00). Return the completed form (pages 1 and 2), check or money order (NO CASH), photocopy of either your driver's license, Social Security card, or birth certificate to your instructor. **DO NOT MAIL IN THE FORM.**

SAVE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS.

TES will mail your form and payment to:

Cabinet for Health and Family Services
Department for Community Based Services
Records Management Section
275 East Main St., 3E-G
Frankfort, KY 40621