

Individual Central Registry Request



ARIZONA DEPARTMENT of CHILD SAFETY

Department of Child Safety (DCS) records are confidential and can be released only to those individuals permitted by state (A.R.S. §8-807) and federal law. This form may be completed by individuals who need to know if they are on the DCS Central Registry.

Note: The results of the request will only show if there is or is not a substantiated report on the DCS Central Registry. For more detailed information please instead complete the [DCS Records Request \(CSO-1036A\)](#).

Directions: Fill out your information and be sure to have the form notarized. When it is complete, email the form to DCSCentralRegistry@azdcs.gov

_____|_____|_____
Name (last, first, middle) | Date of Birth | Social Security Number

Other Names Used (include maiden and/or prior married names)

Address (No., Street, Apt. No., City, State, Zip Code)

Email Address

Signature & Notary

I hereby certify under penalties of perjury that the answers given above are true and correct to the best of my knowledge and belief. By signing this document, I give permission to the states mentioned above to conduct a search of their Central Registry for Abuse/Neglect records and to release any and all information in its entirety to the Arizona Department of Child Safety.

_____|_____|_____
Requester's Name (Please Print) | Requester's Signature | Date Signed

_____|_____
State | County

My commission expires: _____
Commission Expiration Date

_____|_____|_____
Day | Month | Year

Signature of Notary Public

Notary Stamp

To Be Completed by DCS Personnel

_____|_____|_____
Central Registry information checked | Inquiry Results | Report(s) | RID

_____|_____
DCS Representative Signature | Date



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