Per our information,

ARIZONA DEPARTMENT OF CHILD SAFETY VERIFICATION OF RELOCATION OF AN ADULT/CHILD HOUSEHOLD MEMBER



Per Arizona Revised Statutes (A.R.S.) §8-504 and Arizona Administrative Code (A.A.C.) R21-6-206 and R21-6-301 all licensees and adult household members in licensed family foster homes must pass a background check including possession of a valid Level 1 Fingerprint Clearance Card issued by the Arizona Department of Public Safety and a check of the DCS Central Registry and Central Registries of other states in which the adult household member has resided within five (5) years of the date of moving into the licensed foster home. Additionally, a check of the Adult Protective Services Registry in Arizona is required.

The agency will notify the Office of Licensing and Regulation Team Leader by email that the form has been uploaded to OnBase.

	Household Member			
	Does not have a valid Level One Fingerprint Clearance Card and/or a cleared Central Registry Check and/or a cleared Adult Protective Services Registry Check. (A licensing issue has been created and failure to provide verification by due date 'may' result in license revocation.) Has a valid Level One Fingerprint Clearance Card and no longer meets the criteria as an additional Adult household member per R21-6-101 and R21-6-302			
	Household Child no longer meets the criteria as an additional household member per R21-6-101			
and t	herefore does not meet criteria to live in y	our licensed foster home. OLR will require v	rerification by	
that	that no longer resides at your residence or on your premises. Household Member			
	By signing below, I/we certify that the al	pove referenced adult moved from this reside	nce on	
	to			
Date	New Address			
	I choose not to have this adult household	l member vacate, and am voluntarily closing	my license.	
Licensee Signature		Licensee Name Printed	Date	
Licensee Signature		Licensee Name Printed	Date	
Agency Witness Sig	gnature	Agency Witness Name Printed	Date	