

BACKGROUND SCREENING & PERSONNEL FILE REQUIREMENTS

Place in employee file and attach all background screening documentation. Authority: s. 402.301-319, F.S., and s. 435, F.S.

Name of Employee: _						
Name of Facility						
*Social Security #: Date of Birth: Employment Date: *Pursuant to Chapter 435.05, F.S., the Department's license/registration application requires personnel to give their Social Security number for the purposes of background screening. Social security numbers are used by the Department for identity verification only.						
Position	Position Type	Age Group	Education Level			
Classification	(check all that apply)	Assigned	(check one)			
Child Care Personnel	Owner	0 – 12 Months	No High School/GED			
	Director	1 Year	High School Student			
Intermittent Volunteer	Lead Teacher	2 Years	☐ High School/GED			
	(must select age	3 Years	National Early Childhood Credential			
Other Personnel*	group)	4 Years	Birth Through Five Child Care Credential			
	VPK Instructor	☐ 4 Years VPK	School-Age Child Care Credential			
	Assistant Teacher	├─ 5+ Years	Associates Degree			
	Substitute	Mixed	Bachelor's Degree			
	☐ Other Personnel*	Not Applicable	Master's Degree or Higher			

SCREENING DOCUMENTATION

All child care personnel are required by law to be screened pursuant to Chapter 435, F.S., as a condition of employment and continued employment. Screening must be completed prior to employment, following a 90 day break in service, and every five years.

Initial Screen

	Date LiveScanned	Date Eligible	Retention Date					
FBI/FDLE/Florida Sex Offender/National Sex								
Offender/Out of state criminal records (if applicable)								
Florida Child Abuse Registry Check	Date Email Notification Received							
(if screening was processed between July 1, 2016 and December 15, 2016)								
Attestation of Good Moral Character (due on or	Date Signed							
before employment, following a 90 day break, or when changing employers)								
Out of State Criminal History Check (if applicable)	Date Request Subm	itted Date Re	Date Results Received					
Out of State Abuse and Neglect Registry Check (if	Date Request Subm	itted Date Re	Date Results Received					
applicable)								
Out of State Sex Offender Registry Check (if	Date Request Subm	itted Date Re	esults Received					
applicable)								

^{*}Other personnel include kitchen staff, office workers, maintenance, janitors, drivers, and etc.

5 Yea	ır Re-screen							
	Date LiveScanned	Date Eligible	Retention Date					
FBI/FDLE/Florida Sex Offender/National Sex								
Offender/Out of state criminal records (if applicable)	·							
5 Year Re-screen								
	Date LiveScanned	Date Eligible	Retention Date					
FBI/FDLE/Florida Sex Offender/National Sex								
Offender/Out of state criminal records (if applicable)								
<u>OTH</u>	ER REQUIREMENTS							
Date 5 Year Employment Reference Checks Complet								
Names of References (attach additional documentation	on if necessary):							
Job Title	Dates of Employment							
Job Performance:								
Person Contacted:	Date:_							
	"							
Dates of Unsuccessful Attempts to Verify #1	#2	#3						
Unable to verify employment – reason:								
Person Completing Checks (signature):		Date:						
Job Title	Job Title Dates of Employment							
Job Performance:								
Develop Contacted								
Person Contacted: Date:								
Dates of Unsuccessful Attempts to Verify #1	#2	#3						
Unable to verify employment – reason:								
Person Completing Checks (signature):		Date:						
Leave of Absence Documentation from Employer (if a	applicable):							