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|  | **Request for Early Learning** **Background Check Results** |
| Individuals who received a portable background check (PBC) clearance issued by the Department of Children, Youth and Families (DCYF) consistent with [RCW 43.216.270](https://app.leg.wa.gov/rcw/default.aspx?cite=43.216.270) may request a true and accurate copy of their background check results. |
| Email, fax, or mail this request to: DCYF BACKGROUND CHECK UNIT (Early Learning) P.O. Box 40993 Olympia, WA 98504-0971 Fax: (360) 407-5577Dcyf.backgroundcheck@dcyf.wa.gov  |
| **Requesting individual must provide all of the information below:**  |
| DATE  | DATE OF BIRTH (MM/DD/YYYY) | STARS ID NUMBER |
| FULL NAME |
| Full name when you submitted DCYF background check application:Same as current [ ]  |
| EMAIL ADDRESS | PHONE NUMBER | PURPOSE OF REQUEST:[ ]  OSPI\*[ ]  Self  |
| If the purpose of your request is for **Self,** please indicate if you would like your results emailed or mailed to you. [ ]  Emailed, to: [ ]  Mailed, to:   |
| Current Mailing Address:Street | City | State | Zip Code |
| Previous mailing address when you submitted DCYF background check application: |
| StreetSame as current [ ]  | City | State | Zip Code |

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| ***\*The requested documents must be mailed.\*******DCYF STAFF USE ONLY*** |
| **Date WSP and FBI Background Checks Completed: \_\_\_\_\_\_\_\_\_\_\_**[ ]  In-state (WSP) **and** fingerprint (FBI) background checks were completed, and there was no reported background check history for this individual.[ ]  Completed in-state (WSP) background check and a copy of history was provided to individual.[ ]  Completed in-state (WSP) background check and there was no reported background check history for this individual.[ ]  Completed fingerprint (FBI) background check and a copy of history was provided to individual.[ ]  Completed fingerprint (FBI) background check and there was no reported background check history for this individual. | Name of staff fulfilling requestDate sent:  |