Certified Family Child Care - Family Member or Adult Who Resides in the Home

These are not assistants. These are persons who live in the home, are 18 years or older, and never work with the children in the certified family childcare home business.

Last Name _____

First Name _____

Role in Center ____Adult Family Member Who Resides in Home **OR** ____Other Adult Who Resides in Home

Date of Birth _____

Social Security Number _____ (last 4 digits)

Date Person Moved into the Home _____

TB Skin Test Date Completed _____ Date to Be Renewed _____

Adding or removing family member or adult who resides in the home: *When a new family member or adult moves into your home you must notify DRCC. Send copies of their TB Skin Test and completed Background Checks. Be sure to write your certification # on each document.*

Email notification and forms to: chfsoigrccportal@ky.gov
Or, fax notification and forms to: (502) 564-9350
Or, mail copies of the notification and forms to:
Division of Regulated Child Care
275 East Main Street E-F
Frankfort, KY 40621

When a family member or adult moves out of your home, send notification through email to chfsoigrccportal@ky.gov

Results Registry _____ Date of Fingerprint Scan _____ First Day of Work/Residing in Home _____
Note: The fingerprint scan for the assistant must be completed before the first day of work in the center. **For new adults who move into the home, the background checks must be submitted within the first 30 days of residence.**

____ Completed Employer Authorization Form on file *(Maintain a copy of this form for review)*
____ DCC 500 on file *(Maintain a copy of this form for review and upload into NBCP)*
____ DCC 501 on file *(Maintain a copy of this form for review and upload into NBCP)*

Out of state background check needed Yes No *(Maintain a copy of these checks and upload into NBCP)*
For staff under the age of 18: Central Registry Check completed on _____

If applicable, temporary name-based documentation on file through 2022: 1) Central Registry Check Completed on _____
2) Administrative Office of the Courts or KSP Check Completed on _____