



## ARIZONA BOARD OF FINGERPRINTING Central Registry Exception Application Form

PO Box 6129 • Phoenix, Arizona 85005-6129  
Telephone (602) 265-0135 • Fax (602) 265-6240  
info@fingerprint.az.gov • <https://fingerprint.az.gov>

Do not write in this area

### STOP! READ THIS SECTION FIRST! DO NOT SKIP THIS SECTION!

- **Please make sure you've downloaded the correct application.**
  - Are you applying to the Board because your fingerprint clearance card was denied or suspended? If so, this is the **wrong** application form. Please go to fingerprint.az.gov and download the Good Cause Exception Application Form.
  - Are you applying to the Board because you did not clear a central registry background check? If so, this is the **correct** application form.
- Send your completed application to the address at the top of this form. We strongly encourage you to keep a copy of your application package as a backup.
- We want to be able to read and understand your application, so write as clearly as possible
- Please send copies, not originals, of attached documents (such as police reports or case plans). After a certain period of time, we destroy documents, so we may not be able to return originals.
- To avoid a delay in the application process, please read the application instructions before completing this application package. Please answer all questions.
- If you intentionally provide false information, your application may be denied.

### **DENIAL NOTICE FROM DCS, DES or DHS – IMPORTANT!**

You received a notice of denial from the Department of Child Safety (DCS), the Department of Economic Security (DES) or the Department of Health Services (DHS). This notice indicated that you didn't clear the central registry background check. **Include ALL pages of the letter!**

**WE CAN'T PROCESS YOUR APPLICATION WITHOUT THIS LETTER!**  
**IF YOU DO NOT INCLUDE THE LETTER FROM DCS, DES, or DHS,**  
**YOUR APPLICATION WILL BE RETURNED TO YOU**

### CRIMINAL HISTORY BACKGROUND CHECK

In order to apply for central-registry exception, you must have a fingerprint clearance card (or have applied for one) from the Department of Public Safety (DPS). We won't process your application unless you have at least applied for a fingerprint clearance card. Please provide one or more of the following (on the next page) to help us locate your criminal-history information.

**Please note:** the information on the next page is required and should come from your fingerprint clearance card or application. Don't fill out the fields below with numbers from your denial notice from DCS. If you don't include this information, we'll return your application to you, so please make sure you've submitted it.

- Fingerprint clearance card number (appears on card): \_\_\_\_\_
- Fingerprint clearance card application number: \_\_\_\_\_  
*If you applied recently, please also provide the date you applied, since DPS may not have processed your application yet.*
- Social Security number: \_\_\_\_\_  
*This number is strictly voluntarily, and we will only use it to locate criminal-history records under A.R.S. § 41-1750(G)(3). You aren't required to submit this number, but providing it may speed up the process. The outcome of your case will not be negatively affected if you decline to provide this number.*

## PERSONAL INFORMATION

1. **Name on DCS or DES denial notice.** Please provide the name that appears on your notice of denial from DCS or DES. If the name below doesn't match the one on the DCS/DES letter, we may have difficulty processing your application. Please contact us if you've had a legal name change or the name on DCS/DES letter is incorrect.

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

2. **Other names.** In the space below, please list any other names you go by or have gone by at any time in your adult life. You don't need to provide nicknames. Examples include aliases or maiden names.

\_\_\_\_\_

3. **Date of birth.** \_\_\_\_\_

4. **Mailing address.** This is where we'll send all correspondence, so please write the address where we can best reach you. Some of the information we send you is time-sensitive, so be sure to inform us of any change in address as soon as possible.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

5. **E-Mail Address.** **PLEASE PROVIDE AN EMAIL ADDRESS. WE CANNOT SEND YOU UPDATES REGARDING YOUR CASE WITHOUT THIS INFORMATION.**

\_\_\_\_\_

6. **Telephone numbers.** Please provide telephone numbers, including area codes, where we can reach you, in order of preference for reaching you during the daytime. Please also the type of phone (such as home, work, or mobile). (You only need to provide one; the others are optional.)

Phone 1: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Type: \_\_\_\_\_

## CRIMINAL-HISTORY INFORMATION

7. Have you ever been charged with a crime?

Yes

No

**Please note:** you must answer “Yes” even if that charge was dismissed, dropped, or set aside. Please be sure to answer this question accurately so that your application isn’t denied.

If you answered “No,” you may skip questions 7 through 10 below.

8. **Police reports.** For every arrest or criminal charge (even if you weren’t convicted) that occurred within the past five years, please submit a copy of the police report. If you don’t have the police report, you should contact the police or sheriff’s department and submit a request for the report.
9. **Written explanations.** For every arrest or criminal charge in your adult life, you should submit a detailed explanation that describes what happened. Be sure to submit an explanation for each charge, even if you weren’t convicted, no matter how long ago the incident occurred.
10. **Court documents.** For every criminal conviction in your adult life, please provide documentation from the appropriate court showing that you completed your sentence or that a record is no longer available.
- Please refer to the enclosed guidelines on submitting court documents.
  - Be sure to submit court documents no matter how long ago the charge occurred.
  - If your case is pending, or if you haven’t completed your sentence, please provide a written statement that explains in detail the status of your case and when you expect your case or sentence to be completed.
11. **Disposition information.** After you submit your application, we’ll request criminal-history records from the Department of Public Safety. Sometimes, those records don’t show the disposition of a charge (e.g., conviction, dismissal, or acquittal). In that case, we may follow up with you to get court documents showing the disposition. However, to save time, if you already have documentation showing the outcome of your charges, or you can easily get the documentation, you may want to submit it with your application. Please refer to the enclosed guidelines on submitting court documents.

## DEPARTMENT OF CHILD SAFETY (DCS) INFORMATION

12. **Case plan.** After DCS investigated an allegation of child abuse or neglect, did you have a Department of Child Safety (DCS) case plan? (If you received services from DCS and had a case plan, you would have participated in a staffing to develop the case plan, unless you refused to participate. If you never participated or refused to participate in a staffing, you probably did not have a case plan.) Please be sure to answer this question accurately so that your application isn’t denied.

Yes

No

If you answered “Yes” to question 11, please provide a copy of that case plan. If you don’t have the case plan, you must contact DCS to get a copy.

13. **Written statement.** For any substantiated allegation of child abuse or neglect, please submit a detailed explanation that describes what happened. You should provide as much detail as possible; otherwise, your application may be delayed while the Board staff tries to get more detailed explanations from you.
14. **Evidence of rehabilitation.** By applying for a central-registry exception, you're claiming that you're rehabilitated from any substantiated allegation of child abuse or neglect in your past. You should provide any evidence to support your claim to be rehabilitated. At the very least, you should submit a statement that describes what you've done to rehabilitate yourself, such as attending drug treatment, counseling, or a parenting or domestic-violence program. However, your chances of being approved will be greater if you provide documentation to support your claims, such as evidence that you received services or attended a program. For example, if you attended counseling, your application will be much stronger if you provide documentation proving that you attended counseling.

**Please note:** by law, you have the burden of proving to the Board's satisfaction that you're rehabilitated from any substantiated allegation of abuse or neglect. If you submit little or no documentation of your claims, your application will likely be denied.

## OTHER INFORMATION

15. **Reference letters.** Please submit at least two reference letters using the enclosed forms. These two references must meet the following requirements.
- One form must be completed by your current or former employer who has known you for at least one year or by someone who has known you for at least three years.
  - The other form must be completed by someone who has known you for at least one year.

You may make copies of the reference forms if you'd like to submit more than the required two, or you can download a copy of the form from the Forms & Helpful Resources Page on the Board website located at [www.fingerprint.az.gov](http://www.fingerprint.az.gov). Also, you may submit other references letters that don't use the reference forms, as long as you meet the requirements listed above.

## NOTARIZATION

Please have this section notarized by a notary public. If you're not sure where to go to have documents notarized, please consult a business directory like the Yellow Pages.

**I solemnly affirm that the information in this application, including the attached explanations, is true and complete to the best of my knowledge.**

\_\_\_\_\_  
(Signature of applicant; do not sign until you are before the notary public)

\_\_\_\_\_  
(Date)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year).

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)



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1. Letter of Reference for: \_\_\_\_\_

2. Written by: Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

3. Are you the applicant's employer?

Yes

No

4. Are you aware that the Arizona Department of Economic Security has denied clearance for the individual requesting this letter because of a substantiated allegation of child abuse or neglect?

Yes

No

5. Has this individual informed you of the reason(s) for the denial?

Yes

No

6. How long have you been acquainted with this individual? Please indicate the number of:

\_\_\_\_\_ Years

\_\_\_\_\_ Months

7. In what ways do you know this individual? (Please check only one.)

Personally

Professionally

Both

8. Would you recommend that this individual be granted a central-registry exception?

Yes

No

Undecided

9. Please include any additional statements you would like regarding this individual, either below or on a separate sheet.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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