

North Carolina Division of Social Services Regulatory and Licensing

The Perfect New License Packet

Items you must send to the Licensing Authority:

- Cover Letter
- DSS 5015 – Foster Care Facility License Action Request
- DSS 5016 – Family Foster Home License Application – answer each item! Answer N/A where packet allows.
- Court Roles and Responsibilities training certificate
- DSS 1515 – Fire Safety Inspection Report
- DSS 5150 – Environmental Conditions Checklist
- DSS 5018 – Water Hazard Safety Assessment
- DSS 5017 – Medical History Form
- DSS 5156 – Request for Medical Information / TB test results if required.
- DSS-5268 Responsible Individuals List (RIL) Information Request
- Fingerprint Clearance Letters for each applicant and household members 18 years old and up

Things to remember:

- Cover letter: always send with each packet. Your contact information should be included.
- 180 days: Documents must be received within 180 days of the earliest dated document
- 12 months: Date of exam on DSS-5156 Request for Medical Information may be up to 12 months old at time application is received.
- Medical forms – Organized as 5017 & 5156 for each applicant, then other household members, in descending age order
- Tuberculosis Tests – All adults (18 yo & up) in the household must have TB questionnaire completed and if the questionnaire indicates “Yes” TB test required. If TB test is required and is positive, everyone in household must have TB test.
- Signatures and Signature Dates remember to get signatures and signature dates needed on all forms.
- Do not fax documents without prior approval from a licensing consultant.
- CRC/Adam Walsh checks included if applicants or household members have resided in another state within the last 5 years of submission date.

On DSS 5016

- Section IB is for their Adult children in home as only minor children in home go in section IIA
- Part I C. Criminal History & Background Check Information: *If there is a criminal history and/or a CPS history, a letter of advocacy signed by the Director or Agency Head will be needed. It should state the agency's position regarding licensure of the individual, how they have overcome any negative history, and their ability to provide safe, nurturing care for children in foster care.*
- X. B. Part I. Mutual Home Assessment completed by SW, thoroughly complete the 5 parts of the assessment (1) Family history on each applicant; unacceptable – autobiographies, MAPP roadwork/profiles, (2) Assessment of the skills checked (kept in agency file) (3) Shared Parenting Assessment (4) Financial Ability Assessment (5) Dates and places of contacts with family members.
- Part V visit chart clearly notating when required individual interviews and joint interviews were completed
- Cannot be signed before all areas completed to include background results.

- Cannot write N/A under background check findings and dates. Must list out any findings or write no findings

KEEP IN YOUR FILE: Agency/Foster Parent Agreement – Discipline Agreement – Notice of Mandatory Criminal History Check Requirement – Local Court Record Check – Nurse Aide I and Health Care Personnel Registry Check – NC Department of Corrections Check – Sex Offender and Public Protection Registry Check – Reference Letters – DSS-5280 Notice Foster Home Mandatory Criminal History Check