North Carolina Department of Health and Human Services | Division of Social Services Request for Confidential Information Regarding Child Abuse, Neglect and/or Dependency

G.S. § 7B-311 mandates that information in the Central Registry shall be confidential, except as permitted by law. It is unlawful for any person who is authorized to receive information from the Central Registry to release that information to anyone. Your signature below certifies that you are authorized to request this information and indicates that you will not re-disclose this information unless directly connected to mandated responsibilities. NOTE: According to NC law, this form may not be used for Adam Walsh related clearances to approve prospective foster or adoptive applications. Instead, please use the DSS-5268.

Agency Information: Name of Agency						
		d Requestor				
Address						
Phone	Phone Fax					
□ To assist with an op	etion of a en cour ement i	ne): an open CPS investigation or ong it case resulting from abuse and n nvestigating the abuse or neglect	eglect;	gement service	s;	
Child First Name	M.I.	Child Last Name	Date of Birth	Sex / Race	Last Four of SSN	
				/		
				/		
Caretaker First Name	M.I.	Caretaker Last/Maiden Name	Date of Birth	Sex / Race	Last Four of SSN	
Daretaker i ii St Hairie	141.1.	Caretaker Lastimalaeri Name	Date of Birtin	/ /	Last I out of ook	
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				/		
NC Division of Social S MSC 2408 Raleigh, NC 27603-24 Response by NC DHF There is no informat Your request cannot North Carolina is a s the local county leve	Service: 108 1S Diving tion avaus to be prostate-sue the service of the servi	ision of Social Services: ilable based on the information pr cessed based on the information pervised and county-administered se contact:	ovided. supplied. d system, with ind			
County Name		County Phone	County Address			
NCDHHS Consultant			Date			