NC DIVISION OF CHILD DEVELOPMENT

DCD-0050/
DCD-0052
Rev. 7/99

Criminal Records Check Identifying Form for Regulated Programs and Nonlicensed Homes

MARKING INSTRUCTIONS

Correct Mark ● Incorrect Marks ✓ ✗ ⬬ ⊘

- USE A NO. 2 PENCIL ONLY.
- Do not use ink, ballpoint, or felt tip pens.
- Erase cleanly any marks you wish to change.
- Write the letter or number in the box above the ovals, then fill in the corresponding oval completely.
- Make no stray marks on this form.
- DO NOT FOLD, TEAR, OR MUTILATE THIS FORM.

1 START HERE–DO NOT LEAVE BLANK SPACES BETWEEN LETTERS

LAST NAME | FIRST NAME | MI

3 SOCIAL SECURITY #

– –

4 DATE OF BIRTH

Month | Day | Year

5 GENDER

- ○ Male
- ○ Female

6 RACE

- ○ White
- ○ Black
- ○ Hispanic
- ○ Asian
- ○ American Indian
- ○ Other

7 JOB Indicate One (Primary Job)

- ○ Owner
- ○ Director
- ○ Assistant Director
- ○ Teacher
- ○ Teacher Aide
- ○ Substitute Teacher
- ○ Cook
- ○ Driver
- ○ Secretary
- ○ Maintenance
- ○ Applicant
- ○ Other
- ○ Household member over age 15

2 *LEAVE A BLANK SPACE BETWEEN NUMBER AND STREET NAME. ABBREVIATE WHEN POSSIBLE.

MAILING ADDRESS | CITY | STATE | ZIP CODE

–

8 COUNTY OF RESIDENCE

County code entered must correspond to information in box #2 and box #18.

COUNTIES

00	Out of State	21	Chowan	41	Guilford	61	Mitchell	81	Rutherford
01	Alamance	22	Clay	42	Halifax	62	Montgomery	82	Sampson
02	Alexander	23	Cleveland	43	Harnett	63	Moore	83	Scotland
03	Alleghany	24	Columbus	44	Haywood	64	Nash	84	Stanly
04	Anson	25	Craven	45	Henderson	65	New Hanover	85	Stokes
05	Ashe	26	Cumberland	46	Hertford	66	Northampton	86	Surry
06	Avery	27	Currituck	47	Hoke	67	Onslow	87	Swain
07	Beaufort	28	Dare	48	Hyde	68	Orange	88	Transylvania
08	Bertie	29	Davidson	49	Iredell	69	Pamlico	89	Tyrrell
09	Bladen	30	Davie	50	Jackson	70	Pasquotank	90	Union
10	Brunswick	31	Duplin	51	Johnston	71	Pender	91	Vance
11	Buncombe	32	Durham	52	Jones	72	Perquimans	92	Wake
12	Burke	33	Edgecombe	53	Lee	73	Person	93	Warren
13	Cabarrus	34	Forsyth	54	Lenoir	74	Pitt	94	Washington
14	Caldwell	35	Franklin	55	Lincoln	75	Polk	95	Watauga
15	Camden	36	Gaston	56	Macon	76	Randolph	96	Wayne
16	Carteret	37	Gates	57	Madison	77	Richmond	97	Wilkes
17	Caswell	38	Graham	58	Martin	78	Robeson	98	Wilson
18	Catawba	39	Granville	59	McDowell	79	Rockingham	99	Yadkin
19	Chatham	40	Greene	60	Mecklenburg	80	Rowan	100	Yancey
20	Cherokee								

9 Do You Have Any Prior Convictions? ○ Yes ○ No

10 Do You Have Any Pending Indictments? ○ Yes ○ No

11 Have You Lived in NC for More Than 5 Years? ○ Yes ○ No

12 If No, Have You Submitted 2 Fingerprint Cards or Authorized State & National check? ○ Yes ○ No

13 Have You Received Mandatory Notice DCD-0049? ○ Yes ○ No

Please complete only one of the two items below:

14 TYPE OF PROGRAM
- ○ NEW Family Child Care Home
- ○ Family Child Care Home (FCCH)
- ○ Center
- ○ Nonlicensed Home
- ○ Transportation Only Provider
- ○ Program Operating for 4 Hours or Less
- ○ Summer Day Camp

15 CHILD CARE FACILITY ID # (LIC. #)
START # IN FIRST BOX AND ROW

16 For Local Purchasing Agent (LPA) Use Only
NONLICENSED HOME/TRANSPORTATION ONLY PURCHASING COUNTY

17 CHILD CARE FACILITY NAME AND ADDRESS

TELEPHONE #: _____

18 YOUR HOME ADDRESS

TELEPHONE #: _____

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