Instructions for Application for Enrollment in the Child Care Licensing Division's Central Background Registry (CEN-0072)



ONLY for Individuals with Certain Founded or Substantiated Child Abuse Dispositions

The CEN-0072 application is used for new enrollment in the Child Care Licensing Division's Central Background Registry (CBR), or renewing enrollment or reopening an expired Registry enrollment on individual that:

- received a founded or substantiated disposition for child abuse that either:
 - o Occurred on or after September 1, 2019 and involved a child for whom you were either providing child care as defined in ORS 329A.250(4)¹, or care identified in ORS 329A.250(4)(a)², (c)³, (f)⁴, (g)⁵, (h)⁶ or (i)⁷ OR
 - Occurred on or after January 1, 2017, and involved a child who died or suffered serious physical injury, as defined in ORS 161.015,8
- and that individual is seeking to provide care:
 - o in the home of the child;
 - o for children from only one family other than your own family; or
 - o for no more than three children other than your own children.9

(Other individuals must use form CEN-0001 to apply for enrollment in the Central Background Registry.)

Requirements:

If you are one of the individuals identified above, you must be enrolled in the Child Care Licensing Division's Central Background Registry prior to providing care in the home of the child; for children from only one family other than your own family; or for no more than three children other than your own children.¹⁰

NOTE: Your enrollment in the Central Background Registry will be valid for five years unless you are suspended or removed. The Child Care Licensing Division will mail you a renewal notice approximately four months before your expiration date.

IMPORTANT: It is your responsibility to notify the Child Care Licensing Division in writing of a change of name, address, or phone number during the five-year enrollment period so that we can update your information on file. Please include your Central Background Registry enrollment number with all correspondence with the Child Care Licensing Division.

¹ "Subject to ORS 329A.440, 'Child care' means the care, supervision and guidance on a regular basis of a child, unaccompanied by a parent, guardian or custodian, provided to a child during a part of the 24 hours of the day, in a place other than the child's home, with or without compensation." ORS 329A.250 (4). Child Care does not include the conduct listed in ORS 329A.250 (4) (a) to (i).

² "In the home of the child;" ORS 329A.250 (4) (a).

³ "By a person related to the child by blood or marriage within the fourth degree as determined by civil law;" ORS 329A.250 (4) (c).

⁴ "By a babysitter;" ORS 329A.250 (4) (f). Babysitter means "a person who goes into the home of a child to give care during the temporary absence of the parent or legal guardian or custodian." ORS 329A.250 (1).

⁵ "By a person who cares for children from only one family other than the person's own family;" ORS 329A.250 (4) (g).

⁶ "By a person who cares for no more than three children other than the person's own children;" ORS 329A.250 (4) (h).

⁷ "By a person who is a member of the child's extended family, as determined by the [Child Care Licensing Division] on a base-by-case basis." ORS 329A.250 (4) (i).

⁸ Serious physical injury "means physical injury which creates a substantial risk of death, or which causes serious and protracted disfigurement, protracted impairment of health or protracted loss or impairment of the function of any bodily organ." ORS 161.015(8).

⁹ ORS 329A.030 (2) (b).

¹⁰ ORS 329A.030 (2) (b).

Application Checklist:

Before submitting your application for Enrollment in the Central Background Registry to the Child Care Licensing Division, complete the following checklist. Please remove the instruction sheet from the application before sending the form to the Child Care Licensing Division.

Failure to submit a complete application will delay processing.

Completed and signed form CEN-0072 Application f Central Background Registry for Individuals with Cert Dispositions	•				
Check or money order for \$75.00 made payable to the Child Care Licensing Division					
Form CEN-0002 Out of State Information (if applicable)					
Form CEN-0009 Statement of No Social Security Number (if applicable).					
Written explanation and documentation for response to Section 5: Background Information section application (if applicable)					
Mail application with original signature to:	Child Care Licensing Division Unit 22 P.O. Box 4395 Portland, OR 97208-4395				

Note: For renewal applications, submit your application at least 30 days prior to the enrollment expiration date.

SEE INSTRUCTIONS - "How to complete form CEN-0072 Application for Enrollment in the Child Care Licensing Division's Central Background Registry ONLY for Individuals with Certain Founded or Substantiated Child Abuse Dispositions."

If you have questions, please call the Child Care Licensing Division Central Office at 503-947-1400 or 1-800-556-6616 or go to the Child Care Licensing Division website at www.oregon.gov/DELC for more information.

You are entitled to language assistance services and other accommodations at no cost. If you need help in your language or other accommodations, please contact the Department of Early Learning and Care at 503-947-1400

HOW TO COMPLETE FORM CEN-0072 APPLICATION FOR ENROLLMENT IN THE CHILD CARE LICESNING DIVISION'S CENTRAL BACKGROUND REGISTRY

ONLY FOR INDIVIDUALS WITH CERTAIN FOUNDED OR SUBTANTIATED CHILD ABUSE DISPOSITIONS

Refer to these instructions as you fill out each section. The application will be considered incomplete if any required information is missing. An incomplete application will be returned to you and may delay processing time.

Section 1: Application Type

Indicate what type of application you are submitting. If you are renewing or reopening your Registry enrollment with the Child Care Licensing Division, please include your Registry number in the space provided at the top of the application. If you are unable to obtain your Registry number, you may contact the Child Care Licensing Division Central Office at 503-947-1400 or 1-800-556-6616 for more information.

Section 2: Application Information

Please include all applicable information in Section 2 of the form, including your Social Security Number (SSN). The SSN is required for processing the application. If you do not have an SSN, please include a signed form CEN-0009 Statement of No Social Security Number with your application.

Section 3: Language

You may select more than one language. If you check "other", please specify the language and/or dialect. However, be advised not all printed materials are available in other languages.

Section 4: Founded or Substantiated Child Abuse Disposition

NOTICE: If you check "NO" to both questions, the Child Care Licensing Division is not authorized to process your application using this form and it will be returned to the mailing address you have listed on the application.

- 1. If you received a founded or substantiated disposition for child abuse that either:
 - a. Occurred on or after September 1, 2019, and involved a child for whom you were either providing child care as defined in ORS 329A.250(4)¹¹, or care identified in ORS 329A.250(4)(a)¹², (c)¹³, (f)¹⁴, (g)¹⁵, (h)¹⁶ or (i)¹⁷, **OR**
 - b. Occurred on or after January 1, 2017, and involved a child who died or suffered serious physical injury, as defined in ORS 161.015, 18

then check "YES" to number one.

- 2. If you are seeking to provide care:
 - a. in the home of the child:
 - b. for children from only one family other than your own family; or
 - c. for no more than three children other than your own children.¹⁹

then check "YES" to number two.

Section 5: Background Information

Answer "NO" to question number one if you have resided only in Oregon during the previous 5 years. Permanent established residency is not affected by out-of-state vacation periods.

[&]quot;Subject to ORS 329A.440, 'Child care' means the care, supervision and guidance on a regular basis of a child, unaccompanied by a parent, guardian or custodian, provided to a child during a part of the 24 hours of the day, in a place other than the child's home, with or without compensation." ORS 329A.250 (4). Child Care does not include the conduct listed in ORS 329A.250 (4) (a) to (i).

¹² "In the home of the child;" ORS 329A.250 (4) (a).

^{13 &}quot;By a person related to the child by blood or marriage within the fourth degree as determined by civil law;" ORS 329A.250 (4) (c).

¹⁴ "By a babysitter;" ORS 329A.250 (4) (f). Babysitter means "a person who goes into the home of a child to give care during the temporary absence of the parent or legal guardian or custodian." ORS 329A.250 (1).

^{15 &}quot;By a person who cares for children from only one family other than the person's own family;" ORS 329A.250 (4) (g).

^{16 &}quot;By a person who cares for no more than three children other than the person's own children;" ORS 329A.250 (4) (h).

¹⁷ "By a person who is a member of the child's extended family, as determined by the [Child Care Licensing Division] on a base-by-case basis." ORS 329A.250 (4) (i).

¹⁸ Serious physical injury "means physical injury which creates a substantial risk of death, or which causes serious and protracted disfigurement, protracted impairment of health or protracted loss or impairment of the function of any bodily organ." ORS 161.015(8).

¹⁹ ORS 329A.030 (2) (b).

If you answer "YES" to question number one you must list all states resided in during the previous 5 years.

Check "YES" to question number two if you have any felony or misdemeanor convictions in your past.

Check "YES" to question number two if you have committed an offense as a juvenile.

Check "YES" to question number three if you have been arrested or cited for a felony or misdemeanor or committed an offense as a juvenile AND with a final disposition not yet reached.

Check "YES" to question number four if you were a part of a child abuse or child neglect investigation other than the founded or substantiated disposition indicated above in your answer to Section 4 Question 1 (reporting abuse as a mandatory reporter or being a victim of the investigation does not affect this question).

Check "YES" to question number five if you have ever been the subject of a substantiated finding of adult abuse or neglect (reporting abuse as a mandatory reporter or being a victim of the investigation does not affect this question).

Check "YES" to question number seven if you have been a licensed foster care provider and the state agency took legal action against your license or you surrendered your license instead of having legal action taken against your license

If you answer "YES" to questions two, three, four, five, and/or seven please carefully read the section "IMPORTANT" on the application for further instructions.

All subject individuals will receive instructions on how to complete the Federal Bureau of Investigation fingerprint check.

Section 6: Privacy and Authorization Statement

An original signature is required to process the application.





Application for Enrollment in the Child Care Licensing Division 's Central Background Registry (CEN-00072)

ONLY for Individuals with Certain Founded or Substantiated Child Abuse Dispositions

Section I: Application Type and Fe	e: \$/5.00	ree is	non-retundable. Include	e a cneck	or mo	ney ora	er (DC	ONO I SEN	I CASH)
NEW- No previous enrollment RENEW- R						REOPEN- R			
Enrollment to expire within 4 months						osed			
Section 2: Applicant Information		1			T			1	
			Name		Middle			Date Of Birth (mm/dd/yy)	
Gender Male Female SSN (required)				Other Name		r Names	es Used (aliases)		
Physical Address				Mailing A	Addre	ss (if diffe	erent,	include cit	y, state, zip)
City			State	Zip		County	of Re	sidence	
Email			Driver's License Number	Issue Sto	ite		Phon	e Number	
Section 3: Preferred Language NO	ΓE: Not all	Child	Lare Licensing Division m	naterials a	re ava	ailable in	other	languages	
	tnamese		Russian Chinese	Oth				0 0	
Section 4: Founded or Substantiate	ed Child A	huse I	Disposition	_					
I) Have you received a founded or s 2) Are you currently providing or see one family other than your own fam (see Section 4 of instruction If you answered "YES" to question or circumstances surrounding the incid description of any personal changes	eking to pr ily; or (c) c page for n ne of Sect ent(s), incl s you have	ovide are for nore in ion 4, uding made	(a) care in the home of the prince of the prince of the prince of the please list the specific incomplease list the specific incomplease of the please the issues is in the issues in the issues the issues is in the issues in the issues is in the issues in the issue in the	ne child; (b dren othe ese questic dent(s) or roceeding at led to t	o) care r thar ons) n a se s or re he inc	e for child n your ow eparate p esults of cident(s).	dren fi n chil- piece c the inv	rom only dren? of paper. Divestigation nust indicar	YES NO escribe the a, and a te the YEAR
and the STATE in which the incident		ed. Al	lso attach a copy of the fo	ounded or	subs	tantiated	d child	l abuse disp	oosition.
Section 5: Background Information									
1) Have you lived outside of Oregor	,	_	,	oday's da	te?				YES NO
If yes, complete the Out of State						rr.		:1.0	
2) Have you ever been convicted of any crime (misdemeanors or felonies) or committed an offense as a juvenile? YES NO NO YES NO									
 Have you been arrested or cited committed an offense as a juven 					ın a d	iversion p	orogra	am, or	YES NO
Have you ever been part of a chi substantiated disposition indicate			•		ne fou	ınded or		Unsure	YES NO
5) Have you ever been the subject (of a substa	antiate	ed finding of adult abuse	or neglect	?			Unsure	YES NO
6) Have you ever been a foster care	e provider	?							YES NO
7) If you answered yes to questions license/certification or did you su	,		, ,	•	,	our			YES NO
IMPORTANT: If you answered "YES" piece of paper. Describe the circums investigation, and a description of a indicate the YEAR and the STATE in	stances su ny person	rround al cha	ding the incident(s), includ anges you have made to	ling associ	ated	legal, cou	ırt pro	oceedings o	or results of the
If you answered "YES" to question circumstances surrounding the legal of any personal changes you have min which the action(s) occurred.	action(s), nade to ac	includ Idress	ling associated legal, cour the issues that led to the	rt proceed incident(s	lings o). You	or results	of the	action, an	d a description
	Conti	nued	on back (signature and o	date requ	ired)				

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OR Court				_		
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Out of State- SOR						
Section 6: Privacy and	Authorization St	atement	·			
welfare background checkederal Bureau of Investigenforcement agencies, coand sex offender registricthat if I give false or incontraction in the Child Care Licensing check. The information is kept in Number: 2006-0017). I und to the Child Care Licensing employment or not and viby law. I understand that by enro Registry Online (ORO), a sand training and educatic Care, Child Care Licensing Child Care Resource and	gation and Oregon Sourts, child protectives in Oregon and oth applete information, I Division has the autotained from the baccordance with 18 derstand that the inig Division, including Division will not share will only share information subman ground formation subman ground formation, Oregon Courts, child only on the Child Caracterists of the Child Carac	State Police. I aude service agence in purisdictions. I may be denied chority to collect ckground checkground checkground checkground checkground information provinformation proving the the results of nation obtained are Licensing Divides training and exitted to ORO mater for Caree	athorize the Child Care Licies, adult protective serval certify that the information pursuant to a sis used to make a decis 329A.030, Title 28, Unitervide in Sections 4 and 5 covided as part of other apthe background check ein the background ein the backgro	censing Division to vices, and foster control I have provided from the Registre ORS 329A.030 and ion on your enrolling States Code, See of this application in a statement, including with other of Registry I will authorized personnel with ent of Human Sei interest in the Index of Human Sei including Newsons I will authorized personnel with ent of Human Sei interest in the Index of Index	obtain information are agencies in Oreged is correct and cory. d ORS 181A.195 to conent into the Centroction 50.12, OAR (166 nay be used to verient that indicates wher public entities, contaction at the Department of the Department of the Oregen in Oregen III or	about me from law gon and other states; omplete. I understand onduct the background al Background Registry. 6-300-0015 Schedule fy information provided whether I am eligible for as permitted or required to blled in the Oregon to my individual contact of Early Learning and
Applicant's Signature						
Applicant's Signature				Date		-
Preparer's Signature (if applicable)					
I have read this form to this form is, and any at Furthermore, I have wit	tachments hereto	o, are true and	d accurate and agrees	with the registr		
Preparer's Signature				Date		-
Preparer Agency				Phone Numb	 per	-

Out of State Information (CEN-0002)



Please list all of the states you currently reside in or previously resided.

Last, First, MI:			Resided fr Id/yy – mr	
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Zip Code:	County:			

You are entitled to language assistance services and other accommodation at no cost. If you need help in your language or other accommodations, please contact the Department of Early Learning and Care at 503-947-1400.



Child Care Licensing Division's Statement of No Social Security Number (CEN-0009)

Statement of No Social Security Number

By signing below, I certify that I have never been issued a Social Security Number by the United States Social Security Administration. If I am issued a Social Security Number in the future, I will be required to provide it at my next application for certification, registration or enrollment issuance or renewal.

I understand that knowingly supplying a false statement is a Class A misdemeanor. If I do so, I could be punished by imprisonment of up to one year and a fine of up to \$6,250.

Declaración de No tener un Numero de Seguro Social

Al firmar abajo, certifico que nunca ha sido emitido a nombre mío un Número de Seguro Social por la Administración de Seguro Social de los Estados Unidos. Si se emite un Número de Seguro Social a mi nombre en el futuro, tendré que proveerlo en mi próxima solicitud de certificación, registro, emisión o renovación.

Entiendo que proveer una declaración falsa con conocimiento es un delito menor de clase A. Si lo hago, podría ser castigado con encarcelamiento hasta de un año y una multa hasta de \$6,250.

Printed Name / Nombre con letra de molde	
Signature / Firma	Date / Fecha

You are entitled to language assistance services and other accommodation at no cost. If you need help in your language or other accommodations, please contact the Department of Early Learning and Care at 503-947-1400