



STATE OF MICHIGAN  
DEPARTMENT OF HUMAN SERVICES  
LANSING



JENNIFER M. GRANHOLM  
GOVERNOR

MARIANNE UDOW  
DIRECTOR

**REQUEST FOR CENTRAL REGISTRY CLEARANCE**

**INSTRUCTIONS:** Complete the following information and submit request to your "LOCAL" Department of Human Services Office.

I am requesting that DHS provide me with a Central Registry Clearance on myself.

Today's Date		
Name		
Birthdate	Social Security Number	
Current Mailing Address (Street No. and Name)		
City	State	Zip Code
Current Phone Number		
Other Names By Which Known		
_____		
_____		

\_\_\_\_\_ This is to confirm that on the date of the inquiry, \_\_\_\_\_,

The above named person IS NOT listed on the Child Abuse or Neglect Central Registry as a perpetrator of Child Abuse or Neglect.

\_\_\_\_\_ This is to confirm that on the date of the inquiry, \_\_\_\_\_,

The above named person IS listed on the Child Abuse and Neglect Central Registry as a perpetrator of Child Abuse or Neglect.

Signature of Requestor	Signature of DHS Staff Person Completing Request

<p>AUTHORITY: State P.A. 238 of 1975, 722.627, Sec. 7(f)          RESPONSE: Voluntary          PENALTY: Inappropriate release of this information is a misdemeanor.</p>	<p>Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.</p>
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