DHHS CRIMINAL RECORD CHECK UNIT FINAL DECISION NOTIFICATION

This form is to be completed by the authorized agency making a final decision on an applicant who has been found to have a record on the criminal history report completed by the North Carolina State Bureau of Investigation and the Federal Bureau of Investigation. A separate form should be completed for each applicant reviewed.

Applicant Name:		
Applicant Social Security Number:		
Type of Applicant: (check one)		Adoptive Parent
		Foster Parent
Reviewing Agency: (check one)		County DSS (Specify County)
		Black Mountain
Decision: (check one)		Qualified with record
		Disqualified (due to criminal history)
		Disqualified (other)
Letter Date:		
Submitted By:		
		(Authorized Agency Representative)