



## **SAFE FAMILIES FOR CHILDREN INFORMATION**

Thank you for expressing interest in Safe Families for Children. Safe Families (SFFC) is a national movement of compassion which is professionally supported, and volunteer driven. Please see below on next steps and how to become involved as a Host Family or as a member in the Circle of Support.

Please fill out an application. Be aware that your application will ask seemingly personal questions. This is apart of the “professionally supported” aspect of Safe Families. We must guarantee all relevant and safety questions are answered. **Things to know before you fill out the application:** All adults in your home will be required to submit to background checks (*see step #3*) and three references (including one pastoral reference). Please see the details of the approval process below.

1. Please log onto <https://safe-families.org/host-family-application-form/> and complete the host-family application form. If you do not complete the application in one setting, be sure to click “save” periodically and your application will be emailed to you to complete within 14 days. Remember, you will need 3 references and one of those references is a pastoral reference.
2. \*Once your application is received, expect a home visit. We will contact you to arrange a home visit. The visit will allow us to get to know you and your family and to walk through your home.
3. \*Begin the background check process. If you are going to spend any unsupervised time alone with a Safe Families child we require fingerprinting for a FBI, KBI, and child abuse background check. This includes overnight hosting, babysitting, and transporting minor children.
  - a. Please see the attached instructions to fill out the FBI background check, **please be advised**, you and every adult living in the home will need to be fingerprinted;
  - b. Please see the attached form to fill out the KBI and Kansas Abuse and Neglect check.
4. \*Complete our training. All Host Families are required to complete the Safe Families training. This can be done online or in person in your community.

*\*Please be advised that steps 2,3, and 4 will occur simultaneously and in no particular order\**

If you have any questions or concerns, please feel free to reach out to your Kansas team:

**Phone: 913-933-3357**

**Email: [kansas@safefamilies.net](mailto:kansas@safefamilies.net)**

**Website: <https://kansas.safe-families.org/>**

## **Directions for new FBI Electronic Submission Fingerprinting**

**Host Families:** We require FBI fingerprint background checks for everyone 18 years and older who lives in your home.

**Family Friends:** We require FBI fingerprint background checks if you will have contact with children (e.g. transportation, babysitting). If you will be providing babysitting in your own home, everyone 18 years and older who lives in your home will need FBI fingerprint checks.

### **Background Information & Fees**

The FBI fingerprint check needed for Safe Families is called an Identity History Summary Check (IdHSC). The IdHSC is typically used for personal review, adopting a child, or to meet requirements for living or working in a foreign country. **You will indicate on your IdHSC application that you are obtaining your results for personal review.**

Submitting your IdHSC involves two parts: filling out and submitting your applicant information form online and mailing in **a physical card with your fingerprints on it (one card per person), along with your printed confirmation email.** The fingerprint card should be made by a trained fingerprint technician, who may use either the traditional ink method or a digital LiveScan process. If you choose to use LiveScan rather than ink fingerprinting you must ask for a printed hard copy of your LiveScan fingerprints to mail in to the FBI.

#### **FBI fingerprinting will require the following fees:**

- Approximately \$10/person to be fingerprinted, depending on your local fingerprint location fee. (If you choose to use Live Scan it may be \$20)
- \$18/person fee paid directly to the FBI. This is paid online when submitting your online applicant information.

### **Step 1: Submitting Your Application for an FBI Background Check**

**Go to the FBI Identity History Summary Check Website.**

[Click here to access the website.](#) Follow the steps under the "Obtaining Your Identity History Summary" section. **While filling out your applicant information please select:**

1. Reason for request as "*personal review*".
2. Under "Preferences" please select: "Yes" you would like your DOB included on the response.

**3. Select that you would like a hard copy mailed to you as well (in addition to emailed).** We need to have your hard copy on file with Safe Families. Have the hard copy mailed to:

**Safe Families for Children  
P.O. Box 12002 Kansas City, Kansas 66112**

When you have filled out your information you will get a confirmation email that you will need to **print to mail in with your fingerprints.**

## **Step 2: Getting Your Fingerprint Card**

Contact a local law enforcement office (sheriff's office or police department) to inquire about:

- The availability of official FBI fingerprint cards (FD 258)
- Their fingerprinting hours
- Their fee for fingerprinting and type of payment accepted
- Whether an appointment is necessary

*(Note: If asked, you are having your fingerprints taken to mail in for a FBI Identity History Summary check for personal review. You do not need a form provided by Safe Families as you would in the case of foster care licensing.)*

You may wish to obtain two sets of cards per person since a set of low-quality prints unreadable by the FBI may require you to go through the process again. You may choose ink fingerprints or LiveScan. If you choose LiveScan they will need to print out a hardcopy of the results for you to mail in.

## **Step 3: Mailing in Your Fingerprint Card, Confirmation Email, & Payment**

Closely follow all directions provided on the Id HSC website for mailing in your fingerprints and payment. **We recommend mailing in each family member's fingerprints in a separate envelope for smooth processing. The mailing address is on the FBI website under "Submit your fingerprints". Be sure to include your confirmation email!**

## **Step 4: Obtain Your Results Electronically**

**When you receive your secure email with your FBI Identity History Summary results, please:**

1. Click to view your results
2. Download and save your results
3. Email your results (for all family members 18 and over) to: **kansas@safefamilies.net**



Please return the completed form to [kansas@safefamilies.net](mailto:kansas@safefamilies.net) or mail to  
**P.O. Box 12002 Kansas City, Kansas 66112**

**REQUEST FOR KBI/DCF BACKGROUND CHECKS FOR LICENSED FACILITIES**

**Directions:** COMPLETE BOTH SIDES OF THIS FORM. All blank pages must be completed; however, social security number is optional. Incomplete forms will be returned. If a person does not have a Maiden or other name, write N/A. DO NOT include children or youth for whom you provide services. K.A.R. 28-4-125(c) requires the facility to keep a copy of the completed form on file.

Type of Facility:  24 Hour Residential Care Including Family Foster Care  Child Placement Agency

Name of Facility exactly as stated on the license	License #	Date (MM/DD/YYYY)
Street Address of Facility	City	Zip Code + 4
First and Last Name of the Individual Completing This Form	Phone #	E-mail Address

**I. This request for background check is being completed to meet the requirements (CHECK ONLY ONE of the THREE OPTIONS BELOW):**

Initial Application (New Facility, Move, or Change of Ownership)

Renewal Application

Adding a New person(s) living, working or volunteering in the facility. The information provided on this form is to include only the identifying information for new individual(s).

**II. Check YES or NO for each question below with regard to the persons listed on this form. If YES, complete the information in this section.**  
 The information provided on this form is to include: **yourself**, all other persons **10 years of age and older** living in the facility and all persons working and/or volunteering in the facility; all substitutes and other caregivers and staff including relief and support staff, **excluding children placed in foster care.**

YES	NO		Name of Person	Date	Court of Action State and County
		Had a misdemeanor or felony conviction of a crime against persons, a sexual offense or crimes affecting family relationships and children?			
		Had a felony conviction under the uniform controlled substances act?			
		Been adjudicated (found or determined in a court of law to be) a juvenile offender, delinquent, or miscreant?			
		Committed physical, mental or emotional abuse or neglect or sexual abuse as validated by DCF or any other state or governmental agency, regardless if such validation has been expunged?			
		Had a child declared in a court order to be deprived or in need of care based on allegations of physical, neglect or emotional abuse or neglect or sexual abuse?			
		Had parental rights terminated?			
		Signed a diversion agreement involving child abuse or a sexual offense?			
		Been found to be a disabled person in need of a guardian or conservator or both?			

Name of Facility exactly as stated on the license/certificate	License/Certificate#	Date Completed (MM/DD/YYYY)
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**K.A.R. 28-4-125 (c) requires the facility to keep a copy of the completed form on file at the facility.** Type or print plainly using blank ink. Include all names each person used and/or uses.

(Names) Last	First	Middle	Maiden or Any Other Name Ever Used (Alias)	Affiliation (EX: Employee, Volunteer, Resident, Teacher, Contracted Provider, Substitute Caregiver)	Social Security#	Date of Birth (MM/DD/YYYY)	Gender: Male or Female	Race	Address: Street, City, Zip & Home Phone #
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