

**Therapeutic Family Life  
Consent for Background Investigation**



**This form is to be completed by any individual, age 14 and above, who will be in contact with foster children on a frequent basis (i.e., parents and teenagers living in the home, respite workers, volunteers, foster family members, etc.). You may make additional copies of this form or write on the back for additional individuals.**

1. Full Name (no initials, please), and other names used:

_____	_____	_____
First Name	Middle Name	Last Name
_____	_____	_____
Other First Name(s)	Other Middle Name(s)	Other Last Name(s)

2. _____	3. _____	4. _____
Birthdate (Mo/Day/Yr)	Social Security No. <i>(provide copy)</i>	Driver's License No. <i>(provide copy)</i>

5. Ethnicity (must accompany Race):  Hispanic  Not Hispanic  Unknown      6. Gender  Male  Female

7. Race:  White  Black  Asian  American Indian/Alaskan Native  Native Hawaiian/Pacific Islander  Unknown

8. \_\_\_\_\_

Phone number (include area code)	Street Address (include apt. number)	City	County	Zip Code
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9. Have you lived in another state during the last five years?  Yes  No If yes, please list the full address to include city, state, county and the dates of residency:

Full Address City/State/County	Beginning Date (mo/day/year)	Ending Date (mo/day/year)

10. List ALL cities in Texas where you have lived *at any time throughout your life* (include dates):

Name of Texas City	Beginning Date (mo/day/year)	Ending Date (mo/day/year)

11. Position:  Staff  Foster Parent  Respite  Household Member  Frequent Visitor  Nursing Staff  Other \_\_\_\_\_

“Chapter 42 of the Human Resources Code requires the director, owner or operator of a child care facility or family home to provide identifying information on the director, owner and/or operator, each employee and each person 14 years of age or older who will regularly or frequently be staying or working at the facility or home while the children are in care (other than a child in care at the facility or home). It may be necessary for you to obtain additional information if the person does not live in Texas or may have a criminal history in another state. The criminal history and central registry checks are not intended to delay hiring new staff. You will be notified of the results of the check.” \*Any person who applies to be a TFL Employee, Foster or Adoptive Parent, Secondary Caregiver, Respite Provider, Babysitter and any person 14 years of age or older living in the home must complete a FBI criminal history check. An FBI criminal history check is required if a frequent visitor has lived in another state any time during the previous five years or there is reason to suspect other criminal history exists in another state. In addition, an out-of-state central registry check is required for a foster or adoptive parent applicant who has lived outside of the state any time during the previous five years preceding the person’s application to become a foster or adoptive parent must be completed.

**I hereby give my permission for Therapeutic Family Life to use the above information to conduct a background investigation including a criminal history check/Texas Abuse and Neglect Database. All information documented above is accurate and complete.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<p>To be completed by TFL staff:  <i>Has this person had a background check previously for foster or respite purposes, including for other agencies ?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No  <i>FBI Check required?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No  <i>Name of Foster Family (if applicable)</i> _____  <i>Regional Office</i> <input type="checkbox"/> Arlington <input type="checkbox"/> Austin <input type="checkbox"/> Brownwood <input type="checkbox"/> Conroe <input type="checkbox"/> Houston <input type="checkbox"/> Kerrville <input type="checkbox"/> Nederland <input type="checkbox"/> San Antonio <input type="checkbox"/> Temple</p>
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