NOTICE OF FORM CHANGE NO. 05-074

TO: County Welfare Director
    Supply Clerk / Forms Coordinator

FROM: Forms Management Unit
      (916) 657-1907

05/23/2005

Listed below is information regarding a form change. Only applicable information is shown.

This notice updates your Department of Social Services County Forms Catalog.

FORM NUMBER AND TITLE: TLR 508 - Trustline Registry Criminal Record Statement

ORDER UNIT

<table>
<thead>
<tr>
<th>MASTER ONLY</th>
<th>FREE</th>
<th>SOLD</th>
<th>ESTIMATED PRICE</th>
<th>INITIAL SUPPLY SENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>New</td>
<td>☑</td>
<td>☐</td>
<td>☐</td>
<td>Yes</td>
</tr>
<tr>
<td>Revised</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>No</td>
</tr>
</tbody>
</table>

REQUIRES FORM:

☑ No Change Permitted  ☐ Substitute Permitted With Prior DSS Approval  ☐ Recommended Form

UNLESS OTHERWISE SPECIFIED, STOCK MAINTAINED AT:

Department of Social Services Warehouse
P.O. Box 980788
West Sacramento, CA 95798-0788

DISPOSITION OF OLD SUPPLY

☐ Use until exhausted  ☐ Destroy

USE FORM:

☐ When supply available in DSS Warehouse  ☑ Use new form effective 5/05

USE FORM IN ACCORDANCE WITH

☐ All County Letter No.
☐ Other (specify)

ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached is a Reproducible Copy

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 445-6778 or by electronic mail at LTS@dss.ca.gov.
TRUSTLINE REGISTRY CRIMINAL RECORD STATEMENT

State law requires that TRUSTLINE REGISTRY APPLICANTS be fingerprinted and disclose any conviction. A conviction is any plea of guilty or nolo contendere (no contest) or a verdict of guilty. The fingerprints will be used to obtain a copy of any criminal history you may have.

Have you ever been convicted of a crime in California? ........................................... □ YES □ NO

Have you ever been convicted of a crime from another state, federal court, military or jurisdiction outside of U.S.? .................................................. □ YES □ NO

Criminal convictions from another State or Federal court are considered the same as criminal convictions in California.

If you answer YES, give details on the back of this page indicating the nature and circumstances of each crime and the date and the location in which each crime occurred.

You must disclose convictions, including reckless and drunk driving convictions even if:
1. It happened a long time ago;
2. It was only a misdemeanor;
3. You didn’t have to go to court (your attorney went for you);
4. You had no jail time or the sentence was only a fine or probation;
5. You received a certificate of rehabilitation;
6. The conviction was later dismissed, set aside or the sentence was suspended.

NOTE: IF THE CRIMINAL BACKGROUND CHECK REVEALS ANY CONVICTION(S) THAT YOU DID NOT DISCLOSE ON THIS FORM, YOUR FAILURE TO DISCLOSE THE CONVICTION(S) WILL RESULT IN AN EXEMPTION DENIAL, OR TRUSTLINE REGISTRY APPLICATION DENIAL.

I declare under penalty of perjury under the laws of the State of California that I have read and understand the information contained in this affidavit and that my responses and any accompanying attachments are true and correct.

<table>
<thead>
<tr>
<th>YOUR NAME (PRINT CLEARLY)</th>
<th>YOUR ADDRESS</th>
<th>CITY</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOCIAL SECURITY NUMBER (SEE PRIVACY STATEMENT ON REVERSE SIDE)</td>
<td>DATE OF BIRTH</td>
<td>CALIFORNIA DRIVER’S LICENSE OR IDENTIFICATION NUMBER</td>
<td></td>
</tr>
<tr>
<td>SIGNATURE</td>
<td>DATE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Instructions to Respondents:
If you have been convicted of a crime in California or from another state or in federal court, provide the following information:

What was the offense? ____________________________________________

____________________________________

In which state and city did you commit the offense? ____________________________

____________________________________

When did this occur? ____________________________________________

____________________________________

Tell us what happened. (Use additional sheets of paper if needed) ____________________________

____________________________________

I certify under penalty of perjury that the above information is true and correct to the best of my knowledge.

Signature ____________________________ Date ___________________

PRIVACY STATEMENT
Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code section 1798 et seq.), notice is given for the request of the Social Security Number (SSN) on this form. The California Department of Justice uses a person’s SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check.

In order to be PLACED ON THE TRUSTLINE REGISTRY, the law requires that you complete a criminal background check. (Health and Safety Code Sections 1522 and 1596.871) The Department will create a file concerning your criminal background check that will contain certain documents, including information that you provide. You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798 et seq.). Under the California Public Records Act, the Department may have to provide copies of some of the records in the file to members of the public who ask for them, including newspaper and television reporters.

If you have any questions about this form, please contact THE CALIFORNIA CHILD CARE RESOURCE AND REFERRAL NETWORK AT 1-800-822-8490.