

**NOTICE OF FORM CHANGE NO. 05-140**

DATE

10-28-2005

<b>TO:</b> County Welfare Director Supply Clerk / Forms Coordinator	<b>FROM:</b> Forms Management Unit (916) 657-1907
<input checked="" type="checkbox"/> Community Care Licensing District Offices <input type="checkbox"/> Private and Public Adoption Agencies	<input type="checkbox"/> District Attorney <input type="checkbox"/> Other

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 2 (10/05) English only Trustline Application - Voluntary Applicants			
ORDER UNIT MASTER ONLY	<input checked="" type="checkbox"/> Free <input type="checkbox"/> Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	DATE OF FORM 10/05	REPLACES 7/05	<input type="checkbox"/> Obsolete
REQUIRED FORM- <input type="checkbox"/> No Change Permitted	REQUIRED FORM- <input type="checkbox"/> Substitute Permitted With Prior DSS Approval	<input type="checkbox"/> Recommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: <b>Department of Social Services Warehouse</b> <b>P.O. Box 980788</b> <b>West Sacramento, CA 95798-0788</b>		<input type="checkbox"/> Other:	

**FORMS DISPOSITION AND SPECIAL INSTRUCTIONS**

DISPOSITION OF OLD SUPPLY	
<input type="checkbox"/> Use until exhausted	<input checked="" type="checkbox"/> Destroy
USE NEW FORM	
<input type="checkbox"/> When supply available in DSS Warehouse	<input checked="" type="checkbox"/> Use new form effective <u>10/05</u>
USE FORM IN ACCORDANCE WITH	
<input type="checkbox"/> All County Letter No.	
<input type="checkbox"/> Other (specify)	

## ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached is a Reproducible Copy

Print form: 8 1/2 x 11.

Check on the internet to see if forms are available at [www.dss.cahwnet.gov](http://www.dss.cahwnet.gov)For camera-ready copies of English please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: [fmudss@dss.ca.gov](mailto:fmudss@dss.ca.gov).



## TRUSTLINE REGISTRY

### “The California Registry of In-Home Child Care Providers”



#### WHAT IS THE TRUSTLINE REGISTRY?

TrustLine was created by the California Legislature to offer parents, employment agencies, child care resource and referral programs, and child care providers access to a background check conducted by the California Department of Social Services (CDSS). This includes checks of the California Criminal History System and Child Abuse Central Index (CACI) at the California Department of Justice (DOJ) and a check of Federal Bureau of Investigation (FBI) records. The TrustLine Registry is maintained by CDSS and may be checked through the California Child Care Resource and Referral Network (CCCRRN) by calling **1-800-822-8490**.

The CDSS, the CCCRRN, local child care resource and referral programs, parents and child care providers have worked together to develop the TrustLine Registry. The TrustLine Registry is made up of child care providers who have submitted an application to CDSS and their fingerprints to the Department of Justice background clearance process. Individuals listed on TrustLine do not have 1) disqualifying criminal convictions listed on the California Criminal History System; 2) substantiated reports of child abuse listed on the CACI; and 3) disqualifying criminal convictions listed on the FBI Criminal History System. All reports of child abuse found in the CACI will be confirmed with local child protective agencies before they are used to evaluate a TrustLine applicant.

TrustLine is for parents who use in-home and license exempt child care providers, employment agencies, transport escort services, in-home educators and in-home counselors. An in-home child care provider provides care in the child's home (i.e., babysitters, nannies, au-pairs). A license exempt child care provider is an individual who provides child care in his or her own home and is not required to be licensed by CDSS. An employment agency (nanny agency) places individuals in home-based settings to care for children. A transport escort service transports minors across state lines with permission from the minor's parents, custodial parent or legal guardian. In-home educators and counselors tutor or counsel children within the home.

#### HOW TRUSTLINE BENEFITS PARENTS

Parents know they must be very thorough when selecting someone to care for or transport their child. They interview carefully, check references and evaluate the provider's character using their own good judgment. The TrustLine Registry gives parents one more tool to use when it comes time to choose a child care provider.

Parents can call **1-800-822-8490** between the hours of 9:00 a.m. and 5:00 p.m. Monday through Friday to determine if the child care provider he or she is considering has registered with TrustLine. If the individual has not yet registered, information on how a provider can apply to TrustLine will be provided.

#### HOW TRUSTLINE BENEFITS PROVIDERS

When you interview with parents to become a caregiver for their children, you answer questions and supply references. By being listed on the TrustLine Registry you offer added reassurance and demonstrate to parents that you are serious about your profession as a child care provider. Once you are registered, failure to notify the TrustLine Registry Program of a change of mailing address within 10 days will result in your name being removed from the Registry.

If no disqualifying criminal convictions are found on the California Criminal History System, and no reports of substantiated child abuse are found on the Child Abuse Central Index, your name will be placed on the TrustLine Registry pending the FBI check. If you are not listed on the TrustLine Registry because of a disqualifying conviction or a substantiated child abuse report, the CDSS offers an appeal process to allow you to demonstrate your good character. If the appeal is decided in your favor, you will be placed on the TrustLine Registry.

## HOW TO APPLY

To become listed on the TrustLine Registry, you must complete the attached application, including the Trustline Registry Criminal Record Statement ([TLR 508](#)) click to access form, and follow the fingerprint instructions for either the Live Scan, Manual or Transfer process.

**LIVE SCAN PROCESS** - Complete this application form. Schedule an appointment to have your fingerprints scanned with either the Community Care Licensing Live Scan vendor at **1-800-315-4507** or at a Department of Justice Live Scan site - either a Police Department or Sheriff's Office. Take this application form with you to the Live Scan site. If you do not bring this form with you, you may not be fingerprinted. You must contact the Live Scan site at least 24 hours in advance if you are unable to keep your appointment. Submit the completed TrustLine application form along with the appropriate fee to the address listed in Box 10 on the TrustLine application form or contact **1-800-822-8490** for information.

### Processing Fees:

- Community Care Licensing Live Scan site:  
Make check or money order in the amount of \$87.00, payable to the Live Scan vendor and an additional check or money order in the amount of \$43.00, payable to the Department of Social Services.
- Police or Sheriff's Live Scan site:  
Make one check or money order in the amount of \$71.00, payable to the Department of Justice and make one check or money order in the amount of \$43.00, payable to the Department of Social Services. The \$71.00 fee does not include the Live Scan fingerprint rolling fee charged by the Police or Sheriff's Department. This fee varies by site and is paid to the law enforcement agency.

**MANUAL PROCESS** - Complete this application and have your fingerprint impressions placed on one TrustLine fingerprint card (FD 258). Submit the completed application, the completed TLR 508 form and fingerprint card along with the appropriate fee to the address listed in Box 10 on the TrustLine application form or contact **1-800-822-8490** for information.

### • Processing Fees:

Make check or money order in the amount of \$124.00, payable to Department of Social Services. The fingerprint rolling fee varies by site and is paid directly to the fingerprint service agency.

**TRANSFER PROCESS** - If you are currently licensed by the Community Care Licensing Division or working in a facility licensed by Community Care Licensing, you may transfer your background clearance from the Community Care Licensing Division to the TrustLine Registry Program. Check the appropriate boxes in section 8 and submit the completed TrustLine application form along with a photocopy of your I.D. to the address listed in Box 10 of the TrustLine application form or contact **1-800-822-8490** for information. Make one check or money order in the amount of \$43.00, payable to Department of Social Services. If you are transferring your background clearance from a non-child care facility type, a Child Abuse Central Index check is needed and an additional amount of \$15.00 is required. *NOTE: A transfer is not possible from County licensed facilities.*

Application Process	Payment to CDSS	Payment to Live Scan Site
Community Care Licensing Live Scan Vendor	\$43.00	\$87.00 (Includes fingerprint imaging fee.)
DOJ Live Scan Site	\$43.00	\$71.00 (Fingerprint imaging fee varies by site.)
Manual Process	\$124.00 (Fingerprint rolling fee varies by site.)	None
Transfer Process	\$43.00 (\$15.00 fee for Child Abuse Central Index check, if needed.)	None



# TRUSTLINE REGISTRY



## IN-HOME/LICENSE EXEMPT CHILD CARE PROVIDER APPLICATION

See next page for complete instructions. Use a ball point pen and print clearly.

1. NAME: LAST			FIRST			MIDDLE			
2. LIST ALL OTHER NAMES YOU HAVE EVER USED, SUCH AS MAIDEN OR ALIASES. (AKAs)									
3. RESIDENCE ADDRESS:		STREET		APT#	CITY		STATE	ZIP CODE	COUNTY
4. MAILING ADDRESS (IF DIFFERENT):		P.O. BOX/STREET		APT#	CITY		STATE	ZIP CODE	COUNTY
5. DATE OF BIRTH			SEX	HEIGHT		WEIGHT		EYE COLOR	HAIR COLOR
6a. SOCIAL SECURITY NUMBER (Voluntary)						6b. DRIVER'S LICENSE OR ID# / ALIEN REGISTRATION/OUT-OF-STATE ID#			
7. TELEPHONE NUMBERS:						EVENING:			
DAY:									
8. <b>TRANSFER PROCESS:</b> Are you currently licensed or working in, a facility licensed by the California Department of Social Services Community Care Licensing? Do you want to transfer your background clearance from Community Care Licensing to TrustLine? (If yes, fingerprints are not required.) Enter the Facility number. <b>Facility #</b> _____ (Include photocopy of I.D.)									
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No						
9. _____ SIGNATURE (REQUIRED) <span style="float: right;">DATE (REQUIRED)</span>									

**Mail this application to the address in Box 10.**

<p><b>Mail this Application and the TLR 508 to:</b>                  10. Department of Social Services                  Caregiver Background Check Bureau                  Attn:TrustLine Registry Program                  P.O. Box 944243, M.S. 19-57                  Sacramento, CA 95814</p>	<p>11. Fees are required to process this application. The required fees are listed in the "How To Apply" section of the application.</p>
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12. <b>You must complete the Trustline Registry Criminal Record Statement (TLR 508) and include with your application.</b>	
<p>13. <b>PLEASE CHECK, IF APPROPRIATE</b></p> <p><input type="checkbox"/> NANNY AGENCY ID# _____</p> <p><input type="checkbox"/> TRANSPORT ESCORT SERVICE ID # _____</p> <p><input type="checkbox"/> MENTOR AGENCY ID # _____</p> <p><input type="checkbox"/> OTHER, Specify _____ ID # _____</p> <p>Name &amp; Address: _____</p>	<p>14. <b>OFFICIAL USE ONLY</b></p> <p style="text-align: center;"><b>CHILD CARE RESOURCE AND REFERRAL PROGRAM:</b></p> <p>ID# _____</p>

<b>OFFICIAL USE ONLY - LIVE SCAN</b>	
<p>15. <b>ORI:</b> Code assigned by DOJ</p> <p><b>Type of Application</b></p> <p><b>Job Title or Type of License, Certification or Permit:</b> Child Care Provider (Health &amp; Safety Code 1596.603 (c))</p> <p><b>Agency Address Set Contributing Agency:</b> CA Dept of Social Services</p>	<p><input checked="" type="checkbox"/> Trustline A1157 Voluntary</p> <p><input checked="" type="checkbox"/> License, Certification, Permit</p> <p><b>03502</b></p>
Agency authorized to receive criminal history information	Mail Code (five-digit code assigned by DOJ)
P.O. Box 944243 Mail Station 19-57	<b>N/A</b>
Street No. Street or PO Box	Contact Name (Mandatory for all school submissions)
Sacramento CA 94244-2430	( ) <b>N/A</b>
City State Zip Code	Contact Telephone No.

16. Live Scan Transaction Completed by: Name of Operator \_\_\_\_\_ Date \_\_\_\_\_

Transmitting Agency	LSID#	ATI No.	Amount Collected/Billed
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**TRUSTLINE REGISTRY APPLICATION INSTRUCTIONS****PRINT ALL INFORMATION EXCEPT SIGNATURE**

1. Print your full legal name. Do not use nicknames. The printed name and the signature on the application and the fingerprint card must be the same. *NOTE: We recommend that you use the name that is on your identification card. If your I.D. lists your maiden name but you are using a married name, use the married name as the main name and the maiden name as the AKA. If your signature is missing on the application or fingerprint card, the application will be returned.*
2. List all other names you have ever used. *NOTE: This includes aliases such as 'Beth' if used as a legal name.*
3. Print your complete residence address. *NOTE: City names must be spelled out. Abbreviated city names will not be accepted. If you are using a fingerprint card to submit your prints, make sure your full residence address is listed.*
4. Print your complete mailing address, if different than residence address. **Once you are registered, failure to notify the TrustLine Registry Program of a change of mailing address within 10 days will result in your name being removed from the Registry.**
5. List your date of birth, sex, ("M" for male or "F" for female), height, weight, eye color, and hair color. *NOTE: You must be 18 years of age or older to apply for the TrustLine Registry.*
6.
  - a) Print your Social Security Number, Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798 et seq.) , notice is given for the request of your Social Security Number (SSN) on this form. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check. The law requires that you complete a background check (Health and Safety Code Section, 1596.603). 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.
  - b) Print your identification number, which is required. *NOTE: You must list one of these four I.D.s: California Driver License; California I.D. card; Alien Registration Card; or a numbered, picture I.D. issued from a state other than California. If the application has only a Social Security Number without one of the four acceptable I.D.s., it will be returned.*
7. List a daytime and evening telephone number.
8. **TRANSFER PROCESS:** Mark the appropriate boxes **Yes or No**. If Yes, finger prints are not required.
9. You must sign and date the application. If your signature and date are missing, the application will be returned as incomplete.
10. Mail your application and the Trustline Registry Criminal Record Statement (TLR 508) to the address shown in box 10

Applicant have you.....

- 1.) Used exactly the same name on page 3 of the application form and page 1 of the Trustline Registry Criminal Record Statement (TLR 508) and fingerprint card if a fingerprint card is used.
- 2.) Included the appropriate identification number (i.e. California Driver License)?
- 3.) Had your prints taken on an FD-258 fingerprint card or submitted your prints through Live Scan?
- 4.) Signed and dated the application?
- 5.) Included the appropriate fee?
- 6.) Completed, signed and dated the Trustline Registry Criminal Record Statement (TLR 508)?

11. Read "How To Apply" section.
12. **APPLICANT** - You must answer the questions on the **TRUSTLINE REGISTRY CRIMINAL RECORD STATEMENT (TLR 508), Page 1**. If you answered NO to both questions, you must: print your name; provide your address, city, zip code; social security number (voluntary); California License Number, or California ID number, or alien registration number, or a numbered, picture ID issued from a state other than California. You must sign and date Page 1. **NOTE: IF YOU ANSWERED YES TO BOTH QUESTIONS, YOU MUST COMPLETE THE INFORMATION ASKED ON PAGE 2. YOU MUST ALSO SIGN AND DATE PAGE 2.**

**AFTER YOU COMPLETE THIS FORM (TRUSTLINE REGISTRY CRIMINAL RECORD STATEMENT (TLR 508)), YOU MUST RETURN IT TO THE AGENCY ADDRESS LISTED IN BOX 10. IF YOU DO NOT RETURN THIS FORM, YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE. YOUR NAME WILL NOT BE PLACED ON THE TRUSTLINE REGISTRY UNTIL YOU SUBMIT THE TRUSTLINE REGISTRY CRIMINAL RECORD STATEMENT (TLR 508).**

13. Please check the appropriate box. Nanny Agencies, Transport Escort Services and Mentor Agencies must print their name and address. Write your agency code number in this box.
14. Child Care Resource and Referral Program: ID #
15. Official Use - Live Scan