**Attachment J**

**EXHIBIT 1**

**CERTIFICATION OF COMPLETION OF REQUIRED CRIMINAL AND BACKGROUND CHECKS**

The Provider, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby certifies that it has performed all of the following steps (as marked below) as required pursuant to the criminal and background checks procedure set forth in Section 49 [Criminal and Background Checks] of its child welfare services contract (EDS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) (the “Contract”) with the Indiana Department of Child Services (DCS) and has completed all the required criminal and background checks for all of its current employees and volunteers who have or will have electronic or physical access to children’s records or direct contact with children on a regular and continuing basis or any contact when a child(ren) is/are alone or only with the Provider’s staff in connection with performance of any services or activities pursuant to the Contract unless a waiver has been granted for certain employees or volunteers in accordance with the procedure set forth in paragraph (G) of Section 49 of the Contract. **A list of the Provider’s current employees and volunteers that have received the requisite criminal and background checks referenced herein is attached hereto.** The Provider shall submit additional copies of this form to DCS each time that it performs the requisite additional criminal and background checks for employees or volunteers who join the Provider after the commencement date of the Contract **and attach a list of the names of such new employees or volunteers to any additional copies of this form it submits.** With respect to such employee(s) or volunteer(s) who join the Provider after the Contract begins, such employee(s) or volunteer(s) may **not** provide any services for the Provider pursuant to the Contract before the requisite criminal and background checks described in Section 49 of the Contract have been completed.

The Provider hereby certifies that it has:

\_\_\_\_\_ *Verified the identity* of all individuals subject to criminal and background checks;

\_\_\_\_\_ *Conducted Child Protection Services (CPS) checks* (for Indiana, send DCS a Request for Child Protection Services History Check; for other states, *see* DCS’ website on child welfare policies for web link);

\_\_\_\_\_ *Conducted Sex and Violent Offender checks* (*see* DCS’ website on child welfare policies to web links for Indiana and out-of-state checks);

\_\_\_\_\_ *Conducted Local Law Enforcement checks*;

\_\_\_\_\_ *Registered for Fingerprint-Based National and State Checks* (send DCS an Application for Criminal History Background Check); and

\_\_\_\_\_ *Evaluated the Results* of Criminal and Background Checks.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Provider Date