

HOW TO COMPLETE YOUR IN DCS ONLINE FORM

If you continue to have problems while completing the DCS form, please contact the state of Indiana at 1-800-225-9173 or email them at DCSHelpDesk@dcs.in.gov

Indiana CPI/CPS Check for Department of Child Services (DCS)

This email is to inform you that an Indiana CPI or CPS Check was initiated for you. Please log in to the CPI/CPS Portal as soon as possible to complete the process. You will be required to provide additional information and consent to this request.

To enter the "CPI/CPS Portal" click here.

To complete the CPI/CPS request, you will need the following.

- · The last four digits of the Applicant's Social Security Number.
- The <u>Password</u> sent in a separate email from <u>KidTraks@dcs.in.gov</u>. The password will remain active until you check the Consent box and click the Submit button at the bottom of the page.
- You have 20 days to consent to the request before the request expires. If the request expired before you are able to complete it, contact the Requesting Organization (below) to initiate a new Request.
- <u>Previous address history</u> dating back to January 1, 1988 or the Applicant date of birth (whichever is more recent) with no gaps and overlaps.

You will receive 2 emails from <u>KidTraks@dcs.in.gov</u> within <u>48 hours</u> of ordering your Background Check

One will contain the link to begin your form (shown above)
The other will contain your password (please copy exactly as it is)
Your Username should be the last 4 digits of your Social Security Number

Log In & Get Started...

APPLICANT SECTION

Applicant				
Date of Byth (numiddly)	10			
Name (Full Name Required - no Initials unless an	luitial is your legal first name)	Demographic Information	Contact Information	
* Legal First Name		Social Security Number: O	Phone Number	Ext
* Legel Lest Name	-Holund-	Gender at Birth 🚇 🔿 Male 🔿 Female	E-mailAddress @	
Soffic.	-\$eed- *	Has your gender identity changed since birth?	Confirm E-mail:	
		Race (check of that apply):	For additional information, click: Frequently Asked	Questions (FAQs)
Has Applicant ever used any other name, including afflere	ent first, middle, or last name or combination of names? 6	0	Yes 🗇 No	
Examples of alternate names could be any of these: a	nickname, a name prior to adoption, a maiden name, a n	ime from a previous marriage, or a different same due to a name change.		

Verify Information:

Verify DOB is correct Verify Name is correct List middle name or initial in box (if no middle name check that box)

Demographic Information:

Answer all questions in this section and verify that your Social Security Number is correct

Answer Question has the applicant used any other names. (Yes or No) If Yes Click on Add Name (in blue)

Select name type (ex. nickname) Then list your name and **SAVE**.

Do this for each name that you have.

APPLICANT CURRENT RESIDENTIAL ADDRESS

Applicant Current Residential Address			
Street Address:	-Do Not Include PO Boxes	City:	-Please Do Not Abbreviate-
* Country:	United States *	* State:	IN *
County:	-Required for Indiana Addresses Only-	Zip.	+ 4. (optional)
Date Moved in (mm/dd/yyyy):	III		

Select the county that you live in (ex. Hendricks County) List the date you moved in (ex. 04/15/2005) Has to be formatted just like the example

ADDRESS INFORMATION

Please ent	er all past ad	dresses dating back to either January	1, 1988 or your Date of Bir	th, whichever is most recent.					
		/our Date of Birth is 06/05/1995, enter /our Date of Birth is 03/16/1963, enter	· · ·	-	can enter addresses from before 1988, I	but you are not required	to).		
Note: Add	ress dates ma	ay NOT overlap or have any gaps in ti	me between them, or else y	you will not be able to submit	the form.				
Add Address									
Edit	Delete	*Address Type	*Moved In	*Moved Out	Street Address	*Indiana City	*State	Zip +4	*Indiana (

Click on Add Address (in blue)

A new box will appear (if one does not pop up, then date is not in correctly above in current address portion) New box will say All Past Addresses

Please list all Indiana Required fields are ma Regin with the most c	Counties and States			
		of Resid	ency.	
Begin with the most o	arked with an *			
segur man bie most b	urrent residence wor	king back	ward until the mo	nth/year of birth
Address Type:	Select			•
Country:	United States	Ţ		
Street Address:	-Do Not Include	PO Boxe	15	
Indiana City:	-Required for In	diana Ad	dresses Only-)
State:	IN	¥		
Zip Code:			+ 4:	(optional)
Indiana County:	-Required for Inc	liana Add	Iresses Only 🔻)
	Monti	1	Year	
Date Moved In:	Select	•	Select	¥
	Monti	<u>n</u>	Year	
* Date Moved Out:	Select		Select	*

Select address type = 'Residents Past'

If you lived in the state of Indiana you will do the following:

Fill In

- City
- County
- Move-In date
- Move-out date
- No street addresses are needed

Ex. City Avon County Hendricks

Move in May 1996 Move out April 2005

Then **SAVE** it.

If You Have Lived Out of State:

You will change the State from IN to the state you lived in (Ex. IL) Then list move in and move out dates **No street addresses are needed** If you lived

out of the Country:

You will change the Country from the United States to the country you lived in (Ex. Greece) Then list move in and move out dates **No street addresses are needed**

You will continue this process working backwards from the date that you listed in Applicant Current Residential Address until you reach January 1988, or your Date of Birth whichever comes first.

Once add address portion is complete:

Check the box that I hereby consent and submit the form.

Then click SUBMIT

Congratulations! You are Done!



If you get a Validation Error:

Scroll through the form and look for the words <u>Required Field</u>. It will be next to what needs to be corrected. Or you will need to look at your <u>address history</u>, the Error could be there. Make sure dates match up.

If you can't correct the error, give us a call. 888-215-8296

Frequently Asked Questions

- **Q. What if I don't remember all of my addresses back to 1988?** *A. Physical addresses are NOT REQUIRED for the form. You only need to provide the City and County (if in Indiana, otherwise list state or country) with approximate dates. Be as precise as possible, but use your best guess. Be sure your dates are not overlapping.*
- **Q. What if my Personal Information is incorrect (Date of Birth, SSN, etc.)?** *A. Please* **STOP** *and contact our office at 888-215-8296 if you notice your personal information is incorrect. We will need to submit a new form for you.*
- **Q. Why is the school listed not the District I am applying for?** *A. Please STOP* and contact our office at 888-215-8296 if the school district listed is not *the school you are applying for. We may need to submit a new form.*
- **Q. I am trying to login to complete my forms, but it will not let me in?** *A. If* you ordered your background check more than 20 days prior, your invitation to the DCS portion of your check could be expired. IF this is the case, you will require a new invitation. These must be submitted by the organization from which the report is ordered.

Q. How long will this take to process?

A. The state asks to allow between 10-15 business days to complete this search. This timeframe will adjust depending on the time of year.
(August/Back to School time typically has the longest processing time)

Q. I keep getting a Validation Error. What should I do now? *A. This simply means there is an error within a required field on your form. Scroll back to the top of the page and work your way through the form, looking for anything in red indicating an error. If you have verified your information is correct, and are still getting a validation error please call our DCS Team at 888-215-8296 for assistance.*