

## **INSTRUCTIONS FOR COMPLETING THE RELEASE FORM**

### **Fax Number (402) 742-8330**

**The State of Nebraska approved this form, any alteration will invalidate it.**

**APS/CPS guarantees faxed results only to providers that have a dedicated fax. Meaning, providers fax machine does not include a copier, used for pay roll, telephone, answering machine, etc. Fax machine must be set on FAX ONLY all the time.**

- **Limit to five pages at a time.**
- **All fields are required and must be completed. Incomplete or illegible release forms will not be processed and will be returned with an explanation.**

### **Items not to be faxed:**

- **Cover Sheets. All background faxes are received through our computer system. By faxing cover sheets space is used which is allotted for release forms only.**
- **Criminal and/or Sex Offender background checks. These are not included in the APS/CPS review and are processed by a different agency.**
- **Child Care Licensing and/or Nurse Registry Forms. These are processed by those specific divisions within DHHS.**
- **Agency/Facility human resource information.**

**Submit one release form for each applicant, volunteer, etc. and both an APS and CPS check will be processed.**

**Providers processing their 3, 6 month, and/or year review background checks – DO NOT FAX. Mail them to the address listed below and include a self-stamped self-addressed envelope.**

**Once we receive your request, PLEASE ALLOW 2- 3 WEEKS before you contact our office. Please do not resubmit unless our office directs you to. For any questions please call (402)471-9272.**

**Children and Family Services Policy Section  
APS/CPS Background Checks  
3<sup>rd</sup> Floor  
PO Box 95026  
Lincoln, NE 68509**