APPLICATION FOR HOME CARE AIDE REGISTRATION OR RENEWAL

Please type or print clearly. Mail this completed two-page application and the materials specified below to: California Department of Social Services, Home Care Services Bureau, 744 P Street, MS 9-14-90, Sacramento, CA 95814. You can also apply online at Guardian.dss.ca.gov/applicant. **Per Health and Safety Code Section 1796.48, the Home Care Aide initial application and renewal application fee is nonrefundable.**

APPLICATION TYPE: (check one)

☐ Initial Application:

- Application for Home Care Aide Registration or Renewal (HCS 100)
- Check or money order for $35.00, payable to the California Department of Social Services

When fingerprinting, a Request for Live Scan Service – Community Care Licensing form (LIC 9163) must be completed and submitted to the Live Scan operator.

☐ Renewal Application:

- Application for Home Care Aide Registration or Renewal (HCS 100)
- Check or money order for $35.00, payable to the California Department of Social Services

If renewing your registration, the application and fee must be postmarked or submitted on or before your expiration date or your registration will be forfeited.

Required Information

NAME			**DATE OF BIRTH**
Last:	First:	Middle	
MAILING ADDRESS			
Street Address/P.O. Box:			Apt:
City:		State:	Zip Code:

Voluntary Information

The following fields are optional but omission may delay the processing of your application.

ALIASES (AKAs/MAIDEN) OR OTHER NAMES EVER USED	**PER ID/HCA ID (if applicable)**

RESIDENCE ADDRESS		
Street Address:		Apt:
City:	State:	Zip Code:

EMAIL ADDRESS	**TELEPHONE NUMBER**	**SOCIAL SECURITY NUMBER**

** Application continued on page two (2) **

IDENTIFICATION

Document Type: (check one)

- ☐ Valid California Driver's License
- ☐ Valid California Identification Card issued by the Department of Motor Vehicles
- ☐ Valid Permanent Resident Card
- ☐ For a person living in a state other than California, a Valid Numbered Photo Identification Card issued by a state agency other than California (Issuing State:____)

Document Number:	Expiration Date (if applicable):

Disclosure of Personal Information and Opt-Out Information

Health and Safety Code Section 1796.29 requires the California Department of Social Services (CDSS) to provide an electronic copy of a Registered Home Care Aide's name, telephone number, and cellular telephone number (contact information) to a labor organization upon request. The labor organization shall not use this information for any purpose other than employee organizing, representation, and assistance activities, and shall not disclose this information to any other party.

A Registered Home Care Aide or Home Care Aide applicant may opt-out of sharing their contact information with labor organizations. If you do not want your contact information provided to labor organizations, please check the box below.

☐ I **wish to opt-out. I do not want my contact information provided to labor organizations.**

REGISTERED HOME CARE AIDE APPLICANT REQUIREMENTS

- Registered home care aides and home care aide applicants must notify CDSS of a new mailing address within 10 days. (Health and Safety Code §1796.28(a)(2),)
- You must be 18 years of age or older to apply or be a Registered Home Care Aide listed on the Home Care Aide Registry. (Health and Safety Code §1796.21.)
- You must not have had a criminal record exemption denied within the past two years. (Health and Safety Code §1796.26(a)(3).)
- Your application may be denied or your registration may be revoked if:
  - the Department of Social Services or a county had previously revoked or rescinded your license or certificate to be a certified family home or resource family, a certified administrator, or a registered TrustLine provider, or if CDSS had excluded you from a licensed facility, certified family home, or resource family home. (Health and Safety Code §1795.25(a)(3).)
  - the Department of Social Services or a county had previously denied your application for a license from CDSS or certificate to be a certified family home or resource family, a certified administrator, or a registered TrustLine provider. (Health and Safety Code §1795.25(a)(4).)

I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS ON THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE.	
Signature	Date

PRIVACY NOTICE

As Required by Civil Code §1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) and the Care Provider Management Bureau (CPMB) in CDSS collect the information requested on this form as authorized by Penal Code sections 11100-11112; Health and Safety Code sections 1796.22, 1796.23, 1522, 1522.1, and other state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for the purposes of becoming or continuing to be a Registered Home Care Aide. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available on the DOJ Privacy Policy Statement webpage (https://oag.ca.gov/privacy-policy).

Providing Personal Information. All personal information requested in the form must be provided with the exception of a Social Security Number (SSN) Federal law (at Title 5 United States Code Section 552a Note) states that: Any federal, state, or local government agency which requests an individual to disclose his social security account number shall inform that individual whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.

Important: Failure to provide all the required information on this form will result in delays and/or the rejection of your request. 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 background check.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to be a Registered Home Care Aide, the law requires that you complete a criminal background check. (Health and Safety Code sections 1796.23 and 1522). CDSS will create a file concerning your criminal background check that will contain certain documents, including personal information that you provide. You have the right to access certain records containing your personal information maintained by CDSS (Civil Code section 1798 et seq.).

IMPORTANT INFORMATION

Under the California Public Records Act (Government Code section 7920.000 et seq.) and Health and Safety Code section 1796.29, CDSS may provide copies of a Registered Home Care Aide's home care aide number to members of the public who ask for them, including newspaper and television reporters (news media).

The information you provide may also be disclosed in the following circumstances:

- To other persons or agencies where disclosure is necessary for them to perform their legal duties, and their use of your information is compatible and complies with the law, such as for investigations or for licensing, certification, or regulatory purposes.
- To a labor union, if you did not opt-out of sharing your contact information pursuant to Health and Safety Code section 1796.29 (see Opt-Out Information on page 2 of this form).
- To another government agency as required by state or federal law.

QUESTIONS ABOUT NOTICE AND RECORD INFORMATION

For questions about this notice, the Home Care Aide Registry, and the authorized use of your criminal history information, please contact the Home Care Services Bureau.

California Department of Social Services
Home Care Services Bureau
744 P Street, MS 9-14-90
Sacramento, CA 95814

For further questions about criminal records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170

Applicant Notification and Record Challenge

Your fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI). You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, Code of Federal Regulations (CFR), 16.34. You can find additional information on the FBI Identity History Summary Checks webpage (https://www.fbi.gov/services/cjis/identity-history-summary-checks).

Federal Privacy Act Statement

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 United States Code (U.S.C.) 534. Depending on the nature of your application, supplemental authorities include federal statutes, state statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine Uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing,

security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Noncriminal Justice Applicant's Privacy Rights: As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification[1] that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared (https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement).
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28 CFR section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.[2]

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.[3]

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit providing you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained on the FBI Identity History Summary Checks webpage (https://www.fbi.gov/services/cjis/identity-history-summary-checks).

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) You can find additional information on the FBI Identity History Summary Checks webpage (https://www.fbi.gov/services/cjis/identity-history-summary-checks).

1 Written notification includes electronic notification, but excludes oral notification.
2 See 28 CFR 50.12(b)
3 See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)