



# Saint Louis County

Public Health and Human Service Department - [www.stlouiscountymn.gov](http://www.stlouiscountymn.gov)

Linnea Mirsch  
Director

## Process of Completing Background Study for Foster Parents

1. Turn in completed MN CFC Application and Background Study form
2. Social Worker will enter the information in the system and then get you the Authorization form/number.

### After you receive your authorization form/number

#### Payment options:

- A. Online, using a credit or debit card on the 3M Cogent website. <https://cogentid.3m.com/> Choose Minnesota and it will bring you to the option to pay by credit or debit card.
- B. By phone, using a credit or debit card by calling the 3M Cogent Call Center toll free at 1-844-332-7671 Monday through Friday from 8:00 am to 5:00 pm.
- C. At the fingerprint and photo location by check or money order. Cash and credit cards and NOT accepted at the on-site locations.

#### Fingerprint sites and payment of the fingerprint and photo fee

| Location   | Phone        | Cost                | General Information   |
|--|--------------|---------------------|---|
| Floodwood Police Dept.<br>111 W 8 <sup>th</sup> Ave<br>Floodwood, MN 55736 | 218-476-2239 | \$ 9.10 /<br>person | No Appointments Needed.<br>No Children Allowed<br>Monday – Thursday 8:30-12:00<br>Monday – Thursday 1:00 – 3:00 |
| Keystone Bluffs<br>2528 Trinity Rd<br>Duluth, MN 55811                     | 218-727-2800 | \$ 9.10 /<br>person | No Appointments Needed.<br>Monday – Friday 8:00 – 12:00<br>Monday – Friday 1:00 – 3:00                          |
| The Duluth Bethel<br>23 Mesaba Ave<br>Duluth, MN 55806                     | 218-740-3786 |                     | Monday – Friday 8:30 – 4:00<br>Call in advance if more than 3<br>people need prints at the same time            |

3. You have **14 days** (from when the licensor has entered your information into the system) to go to the Fingerprint site.

Credit and Debit Card Payments must be made in advance. Checks and Money orders will be accepted at the location

#### Must bring Photo ID

Children ages 13-17 must also bring ID \*Birth certificate \*School record or report card  
\*Clinic or Hospital record

Children/Family Services  
Government Svc Center  
320 W. 2<sup>nd</sup> Street  
Duluth, MN 55802

*"An Equal Opportunity Employer"*

Phone: (218) 726-2228  
Fax: (218) 725-5186





Minnesota Department of Human Services

CFC BGS DATA COLLECTION FORM
AFC/FADS DATA COLLECTION FORM

Please note that all of the following information (unless otherwise indicated) is required by the Bureau of Criminal Apprehension (BCA) or Federal Bureau of Investigations (FBI). \* Indicates that the field is optional.

Please check one of the following:

Applicant/License-Holder Household Member Other

Form with fields: First Name, Middle Name, Last Name, Prior Names and Aliases, Date of Birth, Race, Sex, Eye Color, Hair Color, Height, Weight, Place of Birth, Telephone #, Street Address, City, State, Zip, County, Driver's License # or MN State-issued ID #, Expiration Date of ID, Social Security #.

Have you lived at the above address for over 5 years? Yes No

If no, please list all city and states where you lived within the last 5 years:

Table with 4 columns: City, State, Year From, Year To. Multiple rows for listing addresses.

## ACKNOWLEDGMENT

I acknowledge that I have read this form and that I have been notified of and understand that the Minnesota Department of Human Services needs this information to complete the background study.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of Parent or Guardian (Required for Minors Only)

\_\_\_\_\_  
Date

*This area is for agency use only*

To ensure accurate processing of the components of NETStudy 2.0 that rely on name and date of birth for matching, it is important that you verify the identity of the subject of the background study. The subject's name and date of birth on this form must match the information on the subject's identification (ID). A list of acceptable forms of ID may be found on the DHS public website.

Identification of the subject has been verified.

**For family CFC only: If the individual has lived outside of the state within the last five years, complete the Child Abuse Neglect Registry (CANR) process in the NETStudy 2.0 system.**

Attachment – Background Study Notice of Privacy Practices

# Minnesota Department of Human Services, Licensing Division – Family Systems

## FAMILY CHILD FOSTER CARE APPLICATION – PRELIMINARY INFORMATION FORM

If a completed child foster care application has been received by your agency, all of the following information must be completed and submitted to DHS Licensing – Family Systems prior to submitting a background study request (NetStudy 2.0). Once this information has been entered in the DHS licensing system, a license number will be assigned. This number will be required to submit all background studies connected to this license.

|                                     |  |
|-------------------------------------|--|
| Name of County/Private Agency       | Email Address (person submitting this form): |
| Name of Licensing Worker (if known) | Licensor Code                                |

### Applicant #1:

|  |                            |  |          |
|--|----------------------------|--|----------|
| Full Legal Name (First, Middle, Last)    Check if no middle name <input type="checkbox"/>            |                            | Date of Birth (MM/DD/YYYY)   |          |
| Street Address (and P.O. Box if required for mail delivery)  |                            | County   |          |
| City   |                            | State  | Zip Code |
| Email Address  | Area Code and Phone Number | Social Security Number   |          |
| Sex:<br><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other |                            | Race:<br><input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American<br><input type="checkbox"/> White <input type="checkbox"/> Other/Unknown |          |

### Applicant #2:

|  |                            |  |          |
|--|----------------------------|--|----------|
| Full Legal Name (First, Middle, Last)    Check if no middle name <input type="checkbox"/>            |                            | Date of Birth (MM/DD/YYYY)   |          |
| Street Address (and P.O. Box if required for mail delivery)  |                            | County   |          |
| City   |                            | State  | Zip Code |
| Email Address  | Area Code and Phone Number | Social Security Number   |          |
| Sex:<br><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other |                            | Race:<br><input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American<br><input type="checkbox"/> White <input type="checkbox"/> Other/Unknown |          |

#### Type of Individuals Served by the Program

- Relative Only
- Non-Relative Only
- Relative & Non-Relative

Are there emergency relative placements (ERP) in the home now?     Yes     No





## Minnesota Department of Human Services

# BACKGROUND STUDY NOTICE OF PRIVACY PRACTICES

Because the Department of Human Services (DHS) is asking you to provide private information, you have privacy rights under the Minnesota Government Data Practices Act. This law protects your privacy, but also allows DHS to give information about you to others when the law requires it. This notice describes how your private information may be used and disclosed, and how you may access your information.

### **Why is DHS asking me for my private information?**

A background study from the Department of Human Services (DHS) is required for your job or position. The private information is needed to conduct the background study.

### **How will I be notified that a background study was submitted on me?**

DHS will mail you a notice within three working days after a request for a background study is submitted on you. The notice will contain the background study result or let you know that more time is needed to complete the background study. The notice will also identify the entity that submitted the background study request.

### **What information must I provide to complete the background study?**

You are required to provide enough information to ensure an accurate and complete background study. This includes your:

- first, middle, and last name and all names you have ever been known by or used;
- current home address, city, zip code, and state of residence;
- previous home addresses, city, county, and states of residence for the last five years;
- sex and date of birth;
- driver's license or other identification number, and;
- fingerprints and a photograph.

### **How will the information that I give be used?**

The information will be used to perform a background study that will include a check to determine whether you have any criminal records and/or have been found responsible for substantiated maltreatment of a vulnerable adult or child. Background study data is classified as "private data" and cannot be shared without your consent except as explained in this notice.

### **What may happen if I provide the information?**

You could be disqualified from positions that require a DHS background study if you are found to have committed certain crimes, been determined responsible for maltreatment of a vulnerable adult or child, or have other records that require a disqualification. If you do not have a disqualifying record, you will be cleared to work.

### **What if I refuse to provide the information?**

You will be disqualified if you refuse to provide information to complete an accurate background study. You will not be able to work in a position that requires a DHS background study.

### **Who will DHS give my information to?**

DHS will only share information about you as needed and as allowed or required by law. The identifying information you provide will be shared with the Minnesota Bureau of Criminal Apprehension and in some cases the Federal Bureau of Investigation (FBI). If there is reasonable cause to believe that other agencies may have information related to a disqualification, your identifying information may also be shared with:

- county attorneys, sheriffs, and agencies;
- courts and juvenile courts;
- local police;
- the Office of the Attorney General, and;
- agencies with criminal record information systems in other states.

### **What information will DHS share with the entity that requested my background study?**

The entity that requested the background study will be notified of your background study determination.

If you are disqualified, the entity will not be told the reason unless you were disqualified for refusing to cooperate with the background study or for substantiated maltreatment of a minor or vulnerable adult.

### **What other entities might DHS share information with?**

Information about your Background study may be shared with:

- the Minnesota Department of Health;
- the Minnesota Department of Corrections;
- the Office of the Attorney General, and;
- health-related licensing boards.



### **What if my disqualification is set aside?**

If you request reconsideration of your disqualification and your disqualification is set aside, the entity that requested the background study will be informed of the reason(s) for your disqualification unless the law states otherwise. DHS will provide information about the decision to set aside your disqualification if the entity requests it.

Unless prohibited by law, your name and the reason(s) for your disqualification will become public data if your set aside is for:

- a child care center or a family child care provider licensed under chapter 245A, or;
- an offense identified in section 245C.15, subdivision 2.

For future background studies submitted by entities that provide the same type of services as the services you were set aside for, the set aside will apply unless:

- you were disqualified for an offense in section 245C.15, subdivision 1 or 2, or;
- DHS receives additional information indicating that you pose a risk of harm, or;
- your set aside was limited to a specific person receiving services.

In addition, those entities will be informed of the reason(s) for your disqualification unless prohibited by law.

### **Will my fingerprints be kept?**

DHS and the Bureau of Criminal Apprehension will not keep your fingerprints. However, if an FBI check is required for your background study, the Federal Bureau of Investigation (FBI) will keep your fingerprints and may use them for other purposes.

### **What information can the fingerprint and photo site view and keep?**

The fingerprint and photo site can view identifying information to verify your identity. The fingerprint and photo site will not keep your fingerprints, photo, or most other information. The fingerprint and photo site can keep your name and the date and time your fingerprints were recorded and sent, for auditing and billing purposes.

### **Who can see my photo?**

Your photo will be kept by DHS. If you provide your social security number to allow your background study to be transferable to future entities, your photo will be available to those entities to verify your identity.

### **What are my rights about the information you have about me?**

- You may ask if we have information about you and request in writing to get copies. You may have to pay for copies.
- You may give other people permission to see and have copies of private information about you.
- You may ask in writing a report that lists the entities that submitted a background study request on you.
- You may ask in writing that the information used to complete your background study be destroyed. The information will be destroyed if you have:

- (1) not been affiliated with any entity for the previous two years, and;
- (2) no current disqualifying characteristic(s).

Please send all written requests to:

Minnesota Department of Human Services  
Background Studies Division  
NETStudy 2.0 Coordinator  
PO Box 64242  
St. Paul, MN 55164-0242

### **How long will DHS keep my background study information?**

DHS will destroy:

- your photo when you have not been affiliated with an entity for two years.
- any background data collected on a you after two years following your death or 90 years after your date of birth, except when readily available data indicates that you are still living.

### **What is the legal authority for DHS to conduct background studies?**

Background studies are completed by DHS according to the requirements in Minnesota Statutes, chapter 245C. Background studies are authorized under Minnesota Statutes, sections 256B.0943, subdivision 5a; 256B.0659, subdivision 11(a)(3); 241.021, subdivision 6(a); 144.057, subdivision 1; 518.165, subdivision 4, and 524.5-118;

### **What if I think my privacy rights have been violated?**

You may report a complaint if you believe your privacy rights have been violated. If you think that the Minnesota Department of Human Services violated your privacy rights, you may send a written complaint to the Minnesota Department of Human Services, Privacy Official at:

Minnesota Department of Human Services  
Privacy Official  
PO Box 64998  
St. Paul, MN 55164-0998