

REQUEST FOR CENTRAL REGISTRY CLEARANCE

Camp Staff/Volunteer 21 years of age or older

Purpose: This request for central registry clearance form is submitted to the licensing unit to determine if a camp staff member/volunteer who is 21 years of age or older is not named in a central registry case as a perpetrator of child abuse or child neglect in the state of Michigan as required by MCL 722.119. The results will be sent back according to the authorizations identified in Section II: Results Instructions.

Instructions:

1. All fields completed by camp staff/volunteer (requestor) providing authorization.
2. All fields must be legible for processing.
3. Submit completed form by mail, fax, or email to:

LARA-BCHS

Adult Foster Care and
Camps P.O. Box 30664
Lansing, MI 48909

Fax: 517-284-9709

LARA-BCHSAFCCampclearance@michigan.gov

Section I: Camp Staff/Volunteer

NAME (Last, First, Middle):	
Alias or other names used:	
Date of birth:	Social Security Number:
I authorize the department to conduct a central registry clearance on me and send the result as requested below.	
Signature:	Date:

Section II: Result Instructions:

The central registry clearance result letter will be sent by the department to the requestor or camp based on the instructions provided below by the requestor.

Check One:			
<input type="checkbox"/> Mail results to requestor or camp address listed below			
<input checked="" type="checkbox"/> Email results to: info@rlca.org			
Requestor Name or Camp Name: Rock Lake Christian Assembly			
Address: 7389 E Vestaburg Rd	City: Vestaburg	State: MI	Zip: 48891
Phone Number 989-268-5377	Camp Contact Name, if applicable: Tim St. Louis		

Any Questions about the Michigan Central Registry Clearance for Camps may be directed to the Bureau of Community and Health Systems Licensing Unit at (866) 685-0006.

AUTHORITY: PA 116 of 1973 and PA 218 of 1979.