

REQUEST FOR A SEARCH OF  
OHIO'S STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM (SACWIS)

Please conduct a search of the Statewide Automated Child Welfare Information System (SACWIS) for my name. This information will be used for the purposes of (check ✓):

Adoption/Foster Parenting       Volunteer Work       Employment       Other \_\_\_\_\_

<p><b>Applicant #1</b></p> <p>Full Name: _____ (Including maiden name, if applicable)</p> <p>Date of Birth: _____</p> <p>Social Security #: _____</p> <p>Signature _____</p> <p>Copies of <u>two</u> (check ✓ <u>2</u>) forms of identification are attached, one of which contains my Social Security number:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Driver license</li><li><input type="checkbox"/> Social Security card</li><li><input type="checkbox"/> Birth Certificate</li><li><input type="checkbox"/> United States Visa</li></ul>	<p><b>Applicant #2</b></p> <p>Full Name: _____ (Including maiden name, if applicable)</p> <p>Date of Birth: _____</p> <p>Social Security #: _____</p> <p>Signature _____</p> <p>Copies of <u>two</u> (check ✓ <u>2</u>) forms of identification are attached, one of which contains my Social Security number:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Driver license</li><li><input type="checkbox"/> Social Security card</li><li><input type="checkbox"/> Birth Certificate</li><li><input type="checkbox"/> United States Visa</li></ul>
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INSTEAD OF PROVIDING TWO FORMS OF IDENTIFICATION, THIS FORM MAY BE NOTARIZED.

This request is notarized in lieu of submitting two forms of identification.

HOME ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____

PREVIOUS ADDRESS IN OHIO _____
CITY _____ STATE _____ ZIP CODE _____

Subscribed and affirmed before me according to law this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

at \_\_\_\_\_, County of \_\_\_\_\_ and State of \_\_\_\_\_.

(City)

\_\_\_\_\_ Notary

Mail request to SACWIS Search Request, Bureau of Protection Services, PO Box 183204, Columbus OH, 43218-3204. The street address is 4200 East Fifth Avenue, 2<sup>nd</sup> floor, Columbus OH 43219. Questions about SACWIS searches may be directed to 614-752-1298 or e-mail Barbara Parker at [barbara.parker@jfs.ohio.gov](mailto:barbara.parker@jfs.ohio.gov) or Janice Blue at [janice.blue@jfs.ohio.gov](mailto:janice.blue@jfs.ohio.gov)



## PROCEDURES FOR AN INDIVIDUAL TO REQUEST A SEARCH OF OHIO'S STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM (SACWIS)

Ohio Revised Code 1347 allows an individual to request and receive information about the status of his or her name on Ohio's Statewide Automated Child Welfare Information System (SACWIS).

A request for a SACWIS search must be made in writing and include the following:

- Full name, including maiden name or other names used, if applicable.
- Date of birth.
- Social Security Number.
- Home Address - Results of a SACWIS search are mailed to the individual requesting at their home address, not to an agency that requires the individual to obtain a search.
- Requester's original signature - requests cannot be faxed or e-mailed.
- The request must EITHER be notarized or the request must be accompanied by copies of two forms of appropriate identification.
- Appropriate forms of identification include: driver license, Social Security card, birth certificate, or United States Visa. Note: At least one of the forms of identification submitted must contain the individual's Social Security Number.
- The request should be mailed to SACWIS Search Request, PO Box 183204, Columbus OH, 43218-3204. The address for express delivery is SACWIS Search Request, 4200 E Fifth Ave, Columbus OH, 43219.

Requests containing incomplete information are returned with a self-addressed envelope advising the additional information required to initiate a SACWIS search.

An individual may use the attached form to request SACWIS searches. Use of this form is not required so long as all of the above information is included in the request.

Please see <http://jfs.ohio.gov/ocf/CentralRegistry1.stm> for responses to Frequently Asked Questions about searches of Ohio's Statewide Automated Child Welfare Information System.

For more information call 614-752-1298 or e-mail Barbara Parker at [barbara.parker@jfs.ohio.gov](mailto:barbara.parker@jfs.ohio.gov) or [janice.blue@jfs.ohio.gov](mailto:janice.blue@jfs.ohio.gov).

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10/2014