



**Authorization for Local Crime Check**  
( needs completed at Local Police Department)

**The person(s) listed below have applied to do childcare or respite care services for foster children placed with Focus on Youth, Inc., a private foster care agency licensed by the Ohio Department of Job and Family Services. A local criminal check is required as a part of the approval process. Thank you for your cooperation and assistance.**

NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOCIAL SECURITY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

RESULTS: \_\_\_\_\_

\_\_\_\_\_

NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOCIAL SECURITY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

RESULTS: \_\_\_\_\_

\_\_\_\_\_

**The above local crime check was completed by \_\_\_\_\_**

**Police Department on \_\_\_\_\_ by \_\_\_\_\_.**  
(Date) (Name of Individual Completing the Check)

