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.

| First Name | Holder 📙 Hou | sehold Member 🔲 Otho | er | | |
|------------------------------------------------|-----------------|----------------------------------------------------|----|---------------------------------------|----------|
| | | Middle Name | | Last Name | |
| Maiden Name, Prior | Names and Alias | ses | | | |
| Date of Birth | | * Race Asian Black White Native American Unknown | | Sex Male Female Unknown Other | |
| Eye Color | | Hair Color | | Height | Weight |
| State or Country of B | irth | | | Telephone # | |
| Current Street Address | | | | City | |
| State | | Zip | | County | |
| Driver's License # or MN State- issued ID # | | Expiration Date of ID | | * Social Security # | |
| Have you lived at t | | ress for over 5 years? es where you lived wit | | | No |
| f no, please list all | | | | | Year To: |

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. |
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Attachment – Background Study Notice of Privacy Practices