

NSOR Instructions

<https://www.dhs.pa.gov/KeepKidsSafe/Clearances/Pages/National-Sex-Offender-Registry.aspx>

	National Sex Offender Registry This verification is only required for: - Any individual 18 years of age or older residing in the child care setting, including any individual working for a regulated child care provider; - Any individual working for a regulated child care provider; - Any individual with an ownership interest (corporate or non-corporate) in a regulated child care provider who participates in the organization and management of the operation; and - Any volunteer of a child care provider, group day care home, or family child care home. To maintain compliance with the federal Child Care Development Block Grant, the Office of Children, Youth, and Families (OCYF) partnered with the Office of Children, Youth, and Families to provide a national search must be performed for any individual working for or as a regulated child care providers caring for children receiving subsidized child care. The verification letter is valid for 60 months. Individuals continuing their relationship with the provider must renew their clearance prior to its expiration. NSOR Verification Application NSOR Verification Application — English NSOR Verification Application — Spanish																												
Be sure to select the option: Individual working for a Regulated Child Care Provider Fill out ALL information correctly and then sign and date.	submission for your employer. - There is no fee for the National Sex Offender Registry verification letter. - Refer all questions to the Clearance Verification Unit at 877-371-5422. <table border="1"><thead><tr><th colspan="2">Purpose of the National Sex Offender Registry Verification (Check one box only)</th></tr></thead><tbody><tr><td>☐</td><td>Individual 18 years or older residing in the facility where child care is occurring.</td></tr><tr><td>☒</td><td>Individual working for a Regulated Child Care Provider.</td></tr><tr><td>☐</td><td>Individual with an ownership interest (corporate or non-corporate) in a Regulated Child Care Provider and who participates in the organization and management of the operation.</td></tr><tr><td>☐</td><td>Volunteer of a child-care provider, group-daycare home or family child care home.</td></tr></tbody></table> <table border="1"><thead><tr><th colspan="2">Applicant Demographic Information (All fields required)</th></tr></thead><tbody><tr><td>Full Name (Last, First, Middle Initial):</td><td></td></tr><tr><td>Social Security Number (XXX-XX-XXXX):</td><td></td></tr><tr><td>Date of Birth (MM/DD/YYYY):</td><td></td></tr><tr><td>Daytime Phone Number (XXX-XXX-XXXX):</td><td></td></tr><tr><td>Home Mailing Address:</td><td></td></tr><tr><td></td><td>Include full street address, (Apt # or PO Box if applicable),</td></tr><tr><td></td><td>City, State and Zip Code</td></tr><tr><td>E-mail Address:</td><td></td></tr></tbody></table> I affirm the above information is accurate and complete to the best of my knowledge and belief, and submitted as true and correct under penalty of law per Section 4904 of the Pennsylvania Crimes Code. Signature: _____ Date: _____	Purpose of the National Sex Offender Registry Verification (Check one box only)		☐	Individual 18 years or older residing in the facility where child care is occurring.	☒	Individual working for a Regulated Child Care Provider.	☐	Individual with an ownership interest (corporate or non-corporate) in a Regulated Child Care Provider and who participates in the organization and management of the operation.	☐	Volunteer of a child-care provider, group-daycare home or family child care home.	Applicant Demographic Information (All fields required)		Full Name (Last, First, Middle Initial):		Social Security Number (XXX-XX-XXXX):		Date of Birth (MM/DD/YYYY):		Daytime Phone Number (XXX-XXX-XXXX):		Home Mailing Address:			Include full street address, (Apt # or PO Box if applicable),		City, State and Zip Code	E-mail Address:	
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	Email, or print out and hand in a copy to your employer promptly so it can be scanned and sent in to the state by your employer. Note: there is no charge for this clearance.																												