

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):

<p><u>Applicant #1</u> PLEASE PRINT</p> <p>Full Name: _____ (Including maiden name, if applicable)</p> <p>Date of Birth: _____</p> <p>Social Security #: _____</p> <p>Signature _____</p> <p>A copy of my Social Security card is attached ____.</p> <p>Also attached is one of the following forms of identification (check <input checked="" type="checkbox"/> one) :</p> <p style="padding-left: 40px;"><input type="checkbox"/> Driver license <input type="checkbox"/> Birth Certificate <input type="checkbox"/> United States Visa</p>	<p><u>Applicant #2</u> PLEASE PRINT</p> <p>Full Name: _____ (Including maiden name, if applicable)</p> <p>Date of Birth: _____</p> <p>Social Security #: _____</p> <p>Signature _____</p> <p>A copy of my Social Security card is attached ____.</p> <p>Also attached is one of the following forms of identification (check <input checked="" type="checkbox"/> one) :</p> <p style="padding-left: 40px;"><input type="checkbox"/> Driver license <input type="checkbox"/> Birth Certificate <input type="checkbox"/> United States Visa</p>
<p>INSTEAD OF PROVIDING TWO FORMS OF IDENTIFICATION, THIS FORM MAY BE NOTARIZED.</p> <p style="text-align: center;">_____ This request is notarized in lieu of submitting two forms of identification.</p>	

<p>HOME ADDRESS _____</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>
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<p>PREVIOUS ADDRESS IN OHIO _____</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>
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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. If using delivery service please, send to 4200 East Fifth Avenue, 2nd floor, Columbus OH 43219. Questions about SACWIS searches may be directed to 614-752-1298 or e-mail janice.blue@jfs.ohio.gov or Lisa Higley, lisa.higley2@jfs.ohio.gov

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

Ohio Administrative Code rule 5101:2-33-21, *Confidentiality and Dissemination of Child Welfare Information*, 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 a copy of the requester's Social Security card and one other form of appropriate identification.
- Appropriate forms of identification include: driver license, birth certificate, or United States Visa.
- 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, 2nd floor, Columbus OH, 43219.
- Requests must be submitted by U.S. mail or other delivery service. E-mailed or faxed requests are not accepted.

Requests containing incomplete information are returned 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/childprotectiveservices.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 Janice Blue at janice.blue@jfs.ohio.gov or Lisa Higley at lisa.higley2@jfs.ohio.gov.

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10/2017