



Record Check Evaluation

Directions: When a background check revealed a criminal conviction (including a deferred judgement), founded child or dependent adult abuse, or a combination thereof, complete this form in black ink or typed. The person being evaluated must complete Part D for **each** transgression. In order to complete the evaluation, all evaluation materials, including form 470-2310, SING, and Rap Sheet and any supporting documents be sent in together. Please ensure that form 470-2310, SING and RAP sheet are dated within last 30 days. All Fingerprint/FBI results shall be sent via mail. Evaluation materials may be submitted via email to recordcheckevals@dhs.state.ia.us, or fax to (515) 564-4034 or mail to Iowa Department of Human Services, Record Check Evaluations, P.O. Box 4826, Des Moines, IA 50305-4826.

Record check evaluation processing date can be found at: <https://dhs.iowa.gov/record-check-evaluations/processing-date>

A. Agency/Provider/Person Requesting Evaluation			
Entity Requesting Evaluation		Requestor's Name	
Street	City	State	Zip Code
Phone	Fax	Requestor's email address	

B. Person Being Evaluated		
Last Name, First Name, Middle Initial	Maiden/Previous Names	Role/Position Applying For

I realize that the information I provide in Section D. may be verified with local law enforcement agencies, the district court, Iowa Department of Human Services, or other persons having knowledge of the incident.

Signature of Person Being Evaluated	Date	Phone	Email
Street Address	City	State	Zip Code

C. Evaluation Determination/Notice of Decision	FOR DHS USE ONLY
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