LICENSING APPLICATION CHECKLIST
DSHS 10-578 (REV. 12/2017)

CHILDREN’S ADMINISTRATION

Licensing Application Checklist

☐ Family Home Study Application, DSHS 10-354: Fill out completely and include contact information for three references including mailing addresses and phone numbers. Two references must be unrelated and list all adult children. Your licensor will contact your references.

☐ Background Authorization (BAF), DSHS 09-653: Anyone 16 years or older living on the premises must submit a BAF and provide a copy of photo identification. Section 2 on the BAF form must be filled out completely. Once the BAF is received, individuals 18 yrs. or older will receive instructions for setting up a fingerprint appointment.

☐ Out of State Child Abuse and Neglect Check, DSHS 15-460: Please complete for anyone submitting a BAF.

☐ Policy Agreements, DSHS 10-290: Please complete and sign.

☐ Employed Foster Parent Child Care Plan, DSHS 10-406: If no child care is needed please note the reason (i.e. stay at home parent, etc.)

☐ Emergency Evacuation Plan DSHS, 16-204: Please complete and sign.

☐ Financial Worksheet, DSHS 14-452: Please attach verification of income (i.e. W-2s, pay stubs, etc.).

☐ Applicant Medical Report, DSHS 13-001: A physical exam completed within the last 12 months is required for each applicant. Please initial and sign the upper section on the form, and give to your medical provider to complete and send back to the licensor directly.

☐ Marital / Domestic Partnership History, DSHS 09-979: Include marriage and/or divorce decrees.

☐ Personal Information, DSHS 15-276: Required for each applicant.

☐ Copy of Driver’s License(s) and Auto Insurance: Provide current copies for each applicant.

☐ Copy of TB Tests: Required for anyone who is 18 years and older living in the home within the last 12 months.

☐ Copy of First Aid, CPR, Blood Borne Pathogens, and HIV/AIDS cards or certificates: Required for anyone who is at least 18 years and is a caregiver. CPR must be in-person and Infant / Child CPR is required if caring for a child under age 8. Active medical licenses may also fulfill this requirement; provide this to your licensor.

☐ Copy of Orientation and Caregiver Core Training certificates: Required for one applicant, but both applicants are encouraged to attend.

☐ Copy of water test completed within last 12 months: Only required if on a private or community well.

☐ Immunization records for children in the home: This is not applicable for foster children.

☐ If requesting to be licensed for children under 2 years of age:
  ☐ Proof of Tdap or DTap (Pertussis / Whooping Cough) immunizations for all household members.
  ☐ Proof of Influenza (flu) immunizations for all household members age six months and above.

☐ Vaccination records for pets

NOTES:

• Foster Home Inspection Checklist, DSHS 10-183, will help you prepare your home for the licensing inspection. The licensor will complete this form.

• The forms listed above are available at [http://www.dshs.wa.gov/fsa/forms](http://www.dshs.wa.gov/fsa/forms). You will need to enter the form number to download and print each form. Do not enter “DSHS” (i.e. enter 10-354 in the Form Number search field). Please keep a copy for your records.

• Submission of an application, DSHS 10-354, and background checks, DSHS 09-653, will start the licensing process, but we encourage you to submit a fully complete packet for more efficient and quicker processing.

• Once your application is received you will be contacted by DLR within 7 days.

Thank you for your interest in becoming a Foster Parent! To learn more about the home study process or for help with application questions please contact:

• Fostering Together at 1-866-958-KIDS (5437) for western Washington residents or
• Fostering Washington at 1-877-620-5748 for eastern Washington residents

These agencies provide support and services to prospective and current foster parents. We look forward to working with you!