



NAFCC Background Check Attestation Form

(For Licensing Department and NAFCC Accreditation Candidates)

Instructions for Completing the Form

1. Download the form from the NAFCC website (Resources section).
2. Fill out all required fields in Sections 1–3. (1 form per person)
3. Ensure the dates of the state and federal background checks are current.
4. Both the candidate and licensor must sign Section 2.
5. Submit the completed form and supporting documents through the NAFCC portal
6. Keep a copy for your records

Note: Forms with missing signatures, incorrect dates, or incomplete information will not be processed.

Section 1 – Educator/ Staff/ House Hold Members Information

Full Name
Role Type: Educator Staff House Hold Member
Circle One
Home/Child Care Address
City / State / ZIP
Telephone
Email (Candidate)
Permit / License #
Licensor Name
Licensor Email
Licensor Telephone



Background Check Requirement for NAFCC Accreditation

Educators and educator assistants pursuing accreditation through the National Association for Family Child Care must successfully complete and maintain current state and federal background checks every 3 years as they relate to the duties and activities of caring for children. The purpose of these background checks is to ensure the safety, well-being, and protection of children in care.

Completion of these checks is required:

- Prior to approval for new accreditation;
- As part of the 18-month update process; and
- Upon renewal of accreditation.

Educators must provide verification of clearance from both state and federal authorities, with the dates of completion clearly documented. All clearances must remain valid and up to date throughout the accreditation period. Failure to obtain or maintain current background checks may result in denial, suspension, or revocation of accreditation. Although NAFCC understands that some states require Federal Background checks every 5 years, the higher NAFCC Accreditation standard mandates 3-year checks.

Section 2 – Background Check Information

Check Type	Date Completed	Results / Clearance #
State Background Check	_____	_____
Federal Background Check	_____	_____

I attest that the above background checks were completed and cleared up on the dates listed.

Educator Signature _____ **Date** _____

State Licensing Representative Signature _____ **Date** _____