

**REQUEST FOR CHILD ABUSE INFORMATION**

Persons or agencies with authorized access to child abuse information must use this form to request information about a registered child abuse report. Complete a separate form for each family or individual.

**SECTION I: To be completed by the person or agency requesting the information.**

Requester: Last		First	or Agency Name		Telephone Number ( )	
Street			City		State	Zip Code
Relationship to the persons listed in Section II or III:						
I have read and understand the legal provisions for handling child abuse information which are printed on the back of this form. I understand that this request will not be approved unless I have authorized access.						
Signature of Requester				Date		

Complete Section II if the purpose of this record check is employment, licensing or registration, or payment approval.

**SECTION II: List the name and address of the person whose record is being checked.**

Last	First	Middle	Birth Date		Social Security Number	
Street		City	County	State	Zip Code	
List maiden name, any previous married names, and any alias:						

Complete Section III if the request is for a copy of the written summary of the abuse investigation or assessment.

**SECTION III: Request for written summary.**

Parent's Name(s): Last		First	Middle	County	Birth Date	Social Security Number
Street		City		State	Zip Code	
List maiden name, any previous married names, and any alias:						
Children's Name(s) (Attach additional pages if necessary):						
Last	First	Middle	County	Birth Date	Social Security Number	

**SECTION IV: Registry or designee decision.**

- This request for information is approved.
- This request for information is denied because:

Signature	Date
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## **LEGAL PROVISIONS FOR HANDLING CHILD ABUSE INFORMATION**

### **Redissemination of Child Abuse Information (Iowa Code 235A.17)**

A person, agency, or other recipient of child abuse information shall not redisseminate (release) this information, except that redissemination is permitted when ALL of the following conditions apply:

- ◆ The redissemination is for official purposes in connection with prescribed duties or, in the case of a health practitioner, pursuant to professional responsibilities.
- ◆ The person to whom such information would be redisseminated would have independent access to the same information under Iowa Code Section 235A.15.
- ◆ A written record is made of the redissemination, including the name of the recipient and the date and purpose of the redissemination.
- ◆ The written record is forwarded to the Central Abuse Registry within 30 days of the redissemination.

### **Criminal Penalties (Iowa Code 235A.21)**

A person is guilty of a criminal offense when the person:

- ◆ Willfully requests, obtains, or seeks to obtain child abuse information under false pretense, or
- ◆ Willfully communicates or seeks to communicate child abuse information to any agency or person except in accordance with Iowa Code Sections 235A.15 and 235A.17, or
- ◆ Is connected with any research authorized pursuant to Iowa Code Section 235A.15 and willfully falsifies child abuse information or any records relating to child abuse.

Upon conviction for each offense, the person shall be punished by a fine of up to \$1,000 or imprisonment for not more than two years, or both fine and imprisonment.

Any person who knowingly, but with criminal purposes, communicates or seeks to communicate child abuse information except in accordance with Iowa Code Sections 235A.15 and 235A.17 shall for each such offense be fined not more than \$100 or be imprisoned not more than ten days.

Any reasonable grounds for belief that a person has violated any provision of Iowa Code Chapter 235A shall be grounds for the immediate withdrawal of any authorized access that person might otherwise have to child abuse information.

## **REQUESTS FOR CORRECTION OR EXPUNGEMENT OF A CHILD ABUSE REPORT**

**To request an administrative appeal hearing of a child abuse report**, please submit a request in writing to: Department of Human Services, Appeals Section, 5th Fl, 1305 E Walnut St, Des Moines, Iowa 50319-0114. You will be notified in writing acknowledging receipt of your request; time, date, and place of your hearing; and any decisions regarding your request. If you disagree with this decision, the written notice will explain how you may request an administrative hearing about the report and its conclusions. Iowa Code Section 235A.19