

NEW YORK STATE  
 OFFICE OF CHILDREN AND FAMILY SERVICES  
**DIVISION OF CHILD CARE SERVICES**  
**NOTICE TO EXPUNGE ASSOCIATED FINGERPRINT CARDS**

**This form should be completed immediately, when any person(s) who were fingerprinted as: a day care provider, assistant, household member over the age of 18, Day Care Center or School-Age program employee or volunteers judged to have regular and substantial contact, are separated from service (no longer part of the day care program).**

The purpose of this form is to provide the Office of Children and Family Services (OCFS) with information that OCFS will use to terminate the search and retain function. "Search and Retain" allows the Division of Child Care Services (DCCS) Regional Office to be notified of arrests in New York State throughout the period that a day care provider, assistant, household member over the age of 18, Day Care Center or School-Age program employee or volunteers judged to have regular and substantial contact remain on record as open/active with DCCS.

**COMPLETE A SEPARATE FORM FOR EACH PERSON WHO WAS FINGERPRINTED AND IS NO LONGER ASSOCIATED WITH YOUR PROGRAM.**

[PLEASE PRINT CLEARLY]

NAME (LAST):	FIRST:	MIDDLE:
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH (MO./DAY/YEAR):	DATE TERMINATED FROM PROGRAM:
PROGRAM NAME:		PROGRAM ID/ CCFS #:
PROGRAM ADDRESS (STREET NO., STREET ADDRESS):		
CITY:	STATE:	ZIP CODE:
CONTACT PERSON:		PHONE #:
SIGNATURE OF PERSON COMPLETING THIS FORM:		DATE:

**This form should be submitted to your licensing representative or registrar**