

Background Check Determination Letter Procedure

To receive a determination letter it will require **THREE STEPS:**

1. **The First Step** is to register with Gemalto/Cogent at https://pci.aps.gemalto.com/gaperlpub/landing_page_1.pl
 - a. Click the DEPARTMENT OF EARLY CARE AND LEARNING (DECAL) button.
 - b. Click REGISTER TO BE FINGERPRINTED button.
 - c. The default language is English. You can choose another language if English is not your first language.
 - d. Read the Non-Criminal Justice Applicant's Privacy Rights and Privacy Act Statement. Check the box "I have read and accepted these terms" and Continue.
 - e. On the APPLICANT REGISTRATIION page, complete all fields highlighted in yellow.
 - f. In the REASON drop down menu select "DECAL-Daycare Director/Employee"
(**Note: Selecting the wrong REASON CODE will result in your fingerprints being rejected and you will lose your money if you fingerprint under the wrong code. DO NOT SELECT DECAL-Employment (State Employees) Reason Code.**)
 - g. Do Not Check the box "Fingerprint Card User". Gemalto/Cogent locations will not be able to do the LiveScan. This is only used for applicants that live outside the state of Georgia and cannot be fingerprinted at a Gemalto/Cogent location in Georgia.
 - h. Once you have completed the application, click the CONTINUE button.
 - i. Verify that all your information is correct, click the CONTINUE button.
 - j. You have reached the payment page.
 - For Credit Card Payments enter your credit card information and billing address information.
 - For Direct Bill Payments enter the paying agency information in the highlighted fields on the right side of the screen.
 - For Money Order Payments, purchase your money order in the amount of \$48.25 and pay this fee at an authorized Gemalto/Cogent location. (**Note: Cash is not accepted at Fingerprinting Locations.**)
 - k. Click the PAY button to process your payment.
 - l. From the confirmation page print or e-mail a copy of your Registration Receipt to yourself. It contains the Registration ID (GA_____ with 15 characters) which will be required for the DECAL Koala application and to show when you fingerprint.
2. **The Second Step** is to complete a Koala Application that gives DECAL the Legal Authority to read your results that are sent from Gemalto/Cogent and issue the determination letter. **Only Use Internet Explorer** when entering a DECAL Koala application. The Koala Application is completed by the licensed center or by the individual. The center will enter the electronic application in their DECAL Koala account. An individual can enter an application electronically and it is sent to the center for approval. The individual application process is:
 - a. Click on <https://decalkoala.com/CBCApplication>
 - b. You will search for the facility that you would like to work for. Only enter **one** field from the four options (Provider Number, Facility Name, Facility City, or Facility Zip). Entering multiple fields will really slow the search down!
 - c. Select your facility from the choices that are found.
 - d. You will now need your Gemalto/Cogent Registration ID (GA_____) for the application.
 - e. Complete the application.
 - f. Check the blue box and type your name.
 - g. Click "Authorize Comprehensive Background Check Application".
3. **The Third Step** is to go to an authorized Gemalto/Cogent Fingerprint Location to be fingerprinted.
 - a. You can find an authorized location at <https://www.aps.gemalto.com/ga/index.htm>
 - b. Under Helpful Links click on "Find A Fingerprint Location".
 - c. Click your region of the State and search by county.
 - d. Go get fingerprinted.

If you have any questions please contact the DECAL's Criminal Records Unit at 1 (855) 884-7444.

GEMALTO/COGENT APPROVED IDENTITY VERIFICATION DOCUMENTS

*Gemalto/Cogent requires current, valid and unexpired picture identification documents

PRIMARY DOCUMENTS

As a primary form of picture identification one of the following will be accepted at the Gemalto/Cogent Fingerprint Location:

- State Issued Driver's License with Photograph
- State Issued Identification Card with Photograph
- US Passport with Photograph
- US Active Duty/Retiree/Reservist Military ID Card (000 10-2) with Photograph
- Government Issued Employee Identification Card with Photograph (includes Federal, State, County, City, etc.)
- Tribal Identification Card with Photograph

SECONDARY DOCUMENTS

In the absence of one of the above Primary Documents, applicants may provide one or more of the following Secondary Documents, along with two of the supporting documents listed below:

- State Government Issued Certificate of Birth
- Social Security Card
- Certificate of Citizenship (N560)
- Certificate of Naturalization (N550)
- INS I-551 Resident Alien Card Issued since 1997
- NS 1-688 Temporary Resident Identification Card
- INS I-688B, I-766 Employment Authorization Card

SUPPORTING DOCUMENTS

Must be supported by *at least two* of the following:

- Utility Bill (with current address)
- Voter Registration Card
- Vehicle Registration Card/Title
- Certificate of Naturalization (N550)
- Current Paycheck Stub with Name/Address
- Cancelled Check or Bank Statement



BRIGHT FROM THE START
Georgia Department of Early Care and Learning

DATE

POSITION DESIRED

DATE AVAILABLE

INTERVIEWED BY

NAME (FIRST) (MIDDLE) (LAST)

SPOUSE'S NAME

HOME ADDRESS

PHONE NUMBER

BIRTH DATE

SOCIAL SECURITY NUMBER

(Circle One)

If you are under age 18, can you submit a work permit if hired? YES NO

If you are not a US citizen, do you have a VISA to work in the US? YES NO

If yes, what kind of Visa classification do you have?

Visa Registration Number: _____ Expiration Date _____

Has bond or security clearance ever been denied and/or canceled? YES NO

If yes, please explain:

EDUCATION (Attach documentation of qualifying education)

PLACE

DATES

DIPLOMA, CERTIFICATE,
DEGREE

ELEMENTARY _____

SECONDARY _____

COLLEGE _____

OTHER _____

Experience with groups of children

(Indicate ages of children, your duties, dates of time you worked in this position, reasons for leaving)

Attach documentation of experience working with children.

(Circle One)

Have you attended/completed any child care training courses? YES NO

If yes list:

PLEASE LIST EMPLOYMENT HISTORY FOR THE PAST TEN YEARS, BEGINNING WITH YOUR MOST CURRENT OR LAST EMPLOYER. If you have been unemployed during any time within the past ten years, list how you spent your time, e.g. student, housewife, unemployed, etc. If you need addition space please use separate employment record form.

MONTH/YEAR	NAME AND ADDRESS OF EMPLOYER	POSITION
FROM		
TO		
FROM		
TO		
FROM		
TO		
FROM		
TO		
FROM		
TO		

Have you attended/completed any child care training courses? YES NO
 Do you have a criminal record? YES NO
 If yes, explain: _____

Have you ever been shown by credible evidence, e.g., a court order or jury, a department's investigation or other reliable evidence to have abused, neglected or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct? YES NO

Under the American with Disabilities Act of 1991, this program is required to reasonably accommodate individuals with a disability. The reasonable accommodation requirement applies to the application process, any pre-employment testing, interviews and actual employment, but only if the program supervisor is made aware that an accommodation is required. If you are disabled and require accommodation, you may request it at any time during the interview process. You are obligated to inform the program director of your needs if it will impact your ability to perform the job for which you are applying.

Having read the job description for the position for which you are applying, are you in all respects, able to adequately perform the duties as described? YES NO
 If no, please explain. _____

Do you have a valid driver's license? YES NO
 If yes, give license number and class of license: _____
 Have you had CPR training within the past two years? YES NO
 If yes, give expiration date: _____
 Have you had first aid training within the past three years? YES NO
 If yes, give expiration date: _____

Bright From the Start: Georgia Department of Early Care Learning requires annual child care training, are you willing to participate? YES NO

I certify that all information on this application is correct. I have not given any false statement concerning my qualification requirements.

SIGNATURE _____ DATE _____

