

FAMILY HOME AGENCY (FHA) AND FAMILY HOME CRIMINAL RECORD DECLARATION

**PURSUANT TO WELFARE AND INSTITUTIONS CODE SECTION 4689.2(c) AND (d)
THIS STATEMENT MUST BE COMPLETED BY**

ANY ADULT NEWLY RESPONSIBLE FOR ADMINISTRATION OR DIRECT SUPERVISION OF FHA STAFF

*ANY ADULT OTHER THAN A CONSUMER NEWLY RESIDING IN AN APPROVED FAMILY HOME IN WHICH
THE FAMILY HOME PROVIDERS, OTHER OCCUPANTS, AND EMPLOYEES HAVE BEEN GRANTED
CRIMINAL RECORD CLEARANCES*

*ANY ADULT NEWLY PROVIDING ASSISTANCE TO THE CONSUMER IN DRESSING, GROOMING, BATHING,
OR PERSONAL HYGIENE*

*ANY NEW STAFF PERSON, EMPLOYEE, CONSULTANT, OR VOLUNTEER WHO HAS FREQUENT AND
ROUTINE CONTACT WITH THE CONSUMER*

ANY NEW EXECUTIVE DIRECTOR OF THE FHA

ANY NEW OFFICER OF THE GOVERNING BODY OF THE FHA

ANY OTHER NEW PERSON WITH A FINANCIAL INTEREST IN THE FHA

- 1. HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A
MINOR TRAFFIC VIOLATION?**

YES

NO

*IF YES, ATTACH A SIGNED STATEMENT INDICATING THE
NATURE AND CIRCUMSTANCES OF THE CRIME(S)*

- 2. HAVE YOU EVER BEEN CONVICTED OF A CRIME AND HAD
THAT CONVICTION SET ASIDE UNDER PENAL CODE
SECTIONS 1203.4 AND/OR 1203.4a?**

YES

NO

*IF YES, ATTACH A SIGNED STATEMENT INDICATING THE
NATURE AND CIRCUMSTANCES OF THE CRIME(S)*

- 3. HAVE YOU RESIDED IN CALIFORNIA CONTINUOUSLY FOR
AT LEAST THE PAST TWO YEARS?**

YES

NO

*IF NO, ATTACH A SIGNED STATEMENT INDICATING THE
DATE YOU MOVED TO CALIFORNIA, AND YOUR PRIOR
STATE OF RESIDENCE*

**I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE READ AND UNDERSTAND THE INFORMATION
CONTAINED IN THE AFFIDAVIT, AND THAT MY RESPONSES AND ANY ACCOMPANYING ATTACHMENTS ARE
TRUE AND CORRECT.**

PRINT NAME CLEARLY	SIGNATURE	
CITY/COUNTY WHERE SIGNED	DATE OF SIGNATURE	DATE OF BIRTH
FHA NAME	FHA ADDRESS	