

Adult Foster Care Background Study Roster Reporting

Submit this form to your RLS to report changes to your background study roster.

If you have a 245D/HCBS license - please contact your DHS licensor to report roster changes.

This could include:

- A household member who moves out and there is no plan for the person to return (divorce, death, etc.)
- An employee, volunteer, or contractor who is no longer employed or affiliated with your program
- Any other time a background study was submitted for a person and that person is no longer affiliated with your program.

Complete the following information about the person who needs to be removed from your roster:

| | |
|------------------------|---------------------|
| Name: | |
| Relationship: | Date of separation: |
| Reason for separation: | |
| | |
| | |
| | |

Provider Signature:

Date:

Provider Printed Name:

RLS Use Only

| |
|-----------------------------------|
| Comments: |
| |
| Date removal requested: |
| Date and staff approving removal: |

Licensor Signature: