

**SELF-CERTIFICATION STATEMENT  
OUT-OF-STATE CLEARANCES  
CHILD CARE CENTERS**

Michigan Department of Licensing and Regulatory Affairs

Applicant/Licensee Name	Facility Name	License Number
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I, \_\_\_\_\_, hereby certify that in the preceding 10 years as an adult, I lived in the state(s) of \_\_\_\_\_

**Child Abuse and Neglect Registry**

Have you ever been substantiated for abuse or neglect of children in the state(s) of previous residence?

No    Yes

If yes, explain, including location and date of substantiations (attach a separate sheet if needed).

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**Criminal History**

Note: This section does not need to be completed by applicants, licensee designees or program directors.

Have you ever been convicted of a crime in the state(s) of previous residence?

No    Yes

If yes, explain, including location and date of substantiations (attach a separate sheet if needed).

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I certify that the information provided on this form is, to the best of my knowledge, true and accurate.

Signature	Date
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LARA is an equal opportunity employer/program.