

REQUEST FOR CHILD WELFARE FORMS
Michigan Department of Health and Human Services
Division of Child Welfare Licensing

Send Requests To	Mail Forms To	
Michigan Department of Health and Human Services Division of Child Welfare Licensing Suite 1305 P.O. Box 30650 Lansing, MI 48909-8150 Fax: (517) 284-9719 Email: mcgrathw@michigan.gov	Name:	
	Facility:	
	Address:	
	City/State/Zip:	
	License #	Phone:
	Email:	

NAME OF FORM	FORM NUMBER	NUMBER OF UNITS (Limit 300 each)	UNITS PER PACK
Environment Health Inspection Request	CWL-1787A		100
Children's Foster Home Rules Compliance Record	CWL-3080		50
Licensing Rules for Foster Family Homes	CWL-PUB-10		25
Licensing Rules for Child Placing Agencies	CWL PUB-11		25
Act No. 116 of the Public Acts of 1973, as amended	CWL-PUB-14		25
Good Moral Character	CWL-PUB-673		100
Licensing Rules for Child Caring Institutions	CWL-PUB-452		25
Children's Foster Home License Application	CWL-3889	mcgrathw@michigan.gov	
LiveScan Fingerprint Background	RI-030	mcgrathw@michigan.gov	
Licensing Record Clearance Request	CWL-1326 CWL-1326-AH CWL-1326-IA	mcgrathw@michigan.gov	

DHS PUB 3 – Child Protection Law visit

https://www.michigan.gov/documents/DHS-PUB-0003_167609_7.pdf

Children's Ombudsman Act visit www.michigan.gov/oco

Special Record DCWL-259 (Non-contracted agencies only)

https://www.michigan.gov/documents/mdhhs/CWL-0259_530981_7.pdf