

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

MAIL REQUEST TO: Michigan Department of Health and Human Services Division of Child Welfare Licensing Suite 1305 P.O. Box 30650 Lansing, MI 48909-8150 Or FAX to: (517) 284-9719	MAIL FORMS TO:	
	Name:	
	Facility:	
	Address:	
	City/State/Zip:	
	License #	Phone #
Email address:		

NAME OF FORM	# OF UNITS PER PK	FORM #	# OF UNTIS
Environment Health Inspection Request	100	DCWL-1787A	(Limit 300)
Children's Foster Home Rules Compliance Record	50	DCWL-3080	(Limit 300)
Children's Foster Home License Application	50	DCWL-3889	(Limit 300)
Licensing Rules for Child Placing Agencies	25	DCWL-PUB-10	(Limit 300)
Licensing Rules for Child Placing Agencies	25	DCWLPUB-11	(Limit 300)
Act No. 116 of the Public Acts of 1973, as amended	25	DCWL-PUB-14	(Limit 300)
Good Moral Character	100	DCWL-PUB-673	(Limit 300)
Licensing Rules for Child Caring Institutions	25	DCWL-PUB-452	(Limit 300)

Licensing Record Clearance Request (DCWL-1326, 1326AH, 1326IA) email: McGrathW@michigan.gov
LiveScan Fingerprint Background RI-030 email: McGrathW@michigan.gov
DHS PUB 3 – Child Protection Law contact: MDHHS at 517-284-9758
Children's Ombudsman Act visit www.michigan.gov/oco
**Special Record DCWL-259 may be downloaded for Non-contracted agencies only at our web site [https://www.michigan.gov/documents/mdhhs/CWL-0259_530981_7.pdf]

All DCWL forms may be reproduced.

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