

# Required SACC Information Checklist

Employee/Volunteer Name \_\_\_\_\_ LDA staff \_\_\_\_\_

Program \_\_\_\_\_

## Items must be completed

1.  Medical Form (updated every 2 years) date \_\_\_\_\_
2.  Current PPD (updated every 2 years) date \_\_\_\_\_
3.  Signed State Central Register Form (SCR) date \_\_\_\_\_
4.  Signed Criminal History Review Form date \_\_\_\_\_
5.  Three (3) letters of recommendation date \_\_\_\_\_
6.  Resume date \_\_\_\_\_
7.  Fingerprint card (Submitted by LDA to OCFS) date \_\_\_\_\_
8.  Training date \_\_\_\_\_

Training hours depend on number of hours worked per week

9 SACC topics need to be covered

**Please sign and date where indicated that you have received the necessary paper work to be completed and returned to LDA of WNY staff, and also sign that you were informed that you will need to send requested information to LDA of WNY.**

**NOTE: Staff/Volunteers are not allowed to work with children until PPD and Medical Form are completed.**

**NOTE: Staff/Volunteers may not work alone with children until results of SCR and submission of fingerprints have been completed.**

### Correspondence dates

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Expunged Date \_\_\_\_/\_\_\_\_/\_\_\_\_