**OCFS-6005** (9//2019)

NEW YORK STATE

OFFICE OF CHILDREN AND FAMILY SERVICES

**CRIMINAL CONVICTION STATEMENT**

**Child Day Care Programs**

INSTRUCTIONS:

* **ALL** applicants for a licensure or registration, staff, volunteers, and household members 18 years of age or older must complete and sign this Criminal Conviction Statement.
* Please **PRINT** clearly

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| Program Name:  The Children's Center at Purchase College |  | FACILITY ID Number:  41379 |
| PERSON'S Name: |  | Date of Birth *(mm/dd/yyyy):* |

Certification

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| --- |
| I certify that to the best of my knowledge and belief:  **I have**  **i HAVE NOT**  **been convicted of a crime in New York State or other jurisdiction.**  *(A crime is a misdemeanor or felony only; this does not include violations. You do not need to disclose crimes that the court designated with a "Youthful Offender" status.)* |

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| To the best of my knowledge the information provided above is true and accurate. I understand that my failure to truthfully and accurately state whether I have been convicted of a crime may constitute grounds for dismissal or denial of employment, or suspension, limitation or revocation of the license or registration to provide child care at this site. | |
| SIGNATURE: | DATE: *(mm/dd/yyyy):*    /    / |