



Children Youth & Families Department
Protective Services Division/Placement, Prevention & Adoption Resource Bureau/
Criminal Records Check Unit



Children Youth & Families Department

CRC Application

***Form shall be typed. Form will be rejected if information is missing. ***

Please ensure you are using the most updated forms. Visit <https://cyfd.org/for-providers/info-and-manuals> for further instructions and updated forms. Please follow all the directions. If you have any questions, please call (505)827-8400 or email us at CYFD.PSCriminalReco@cyfd.nm.gov.

Fingerprint Registration Information

Choose the following ORI when registering applicants:

Registration ID# :

you will receive this ID# after you have completed Step #2 registering your applicant to be fingerprinted.

Agency Information

*Type of Agency:

Applicant Status:

*Court Docket:

Court Name:

TFC Status:

*Agency Name:

*Contact Person:

*Phone #:

*E-mail:

*Mailing Address:

*City

, NM *Zip

Applicant Information

*First Name

*Middle Name No Initials. If none then NMN

*Last Name

*Aliases / AKA / Madien Name, Jr., Sr., nick name(s) etc. If none then N/A * Place of Birth City, State

*Social Security Number 9 digits

*Date of Birth mm/dd/yyyy

*Drivers License Information

State

DL#

*Physical Address Include apartment / unit # if applicable

*City

*Zip

, NM

*Citizenship

*Race

*Height

*Weight

*Phone #

*Eye Color drop down box

*Hair Color drop down box

*Sex

Female

Male

The following documentation shall be Emailed to our office:

1. CRC Application
2. Fingerprint Submission Receipt Not registration receipt Please see step #3 under instructions online.
3. Child Abuse & Neglect Form

These documents shall be Emailed to:

CYFD.PSCriminalReco@cyfd.nm.gov