



LUTHERAN SOCIAL SERVICES OF THE NATIONAL CAPITAL AREA

7410 New Hampshire Ave
Takoma Park, MD 20912
Phone: (301) 434-0080

4406 Georgia Avenue, NW
Washington, D.C. 20011
Phone: (202) 723-3000
Fax: (202) 723-3303

9506 A Lee Highway
Fairfax, VA 22031
Phone: (703) 273-0303
Fax: (703) 273-5335

MARYLAND CHILD ABUSE/NEGLECT CLEARANCE AND ALL SERVICE CLEARANCE

I hereby give the City/County of _____, Department of Social Services, State of _____ my consent to release any records of child abuse or neglect and all service clearance to LUTHERAN SOCIAL SERVICES of the National Capital Area. I reserve the right to request and receive a copy of all files shared with them. The purpose has been explained to me to be part of determining fitness of applicants to be either adoptive parents or foster parents.

Applicant 1

Applicant 2

Applicant's Signature

Applicant's Signature

Please Print First, Middle and Last Name

Please **Print** First, Middle, Last and/or Maiden Name

Other Name(s) Used

Other Name(s) Used

Birth Date

Birth Date

Race

Race

Social Security Number

Social Security Number

Street Address

City/County and Zip Code

Request by: _____ Anita Greenberg, Supervisor, Adoption/Foster Care
Worker and Title

Sworn to and subscribed before me on this _____ day of _____ 20__.

Notary Public

My Commission Expires _____