Arkansas checklist:

* Complete disclosure form: <https://www.tn.gov/content/dam/tn/human-services/documents/hs-2779.docx>
* Complete both Arkansas forms: <https://www.tn.gov/content/dam/tn/human-services/documents/AR_Form_APS-0001.pdf> and <https://www.tn.gov/content/dam/tn/human-services/documents/AR_Child_Maltreatment_Registry_Form.pdf>
* Have both Arkansas forms notarized
* Email, fax or mail the checklist, disclosure form and both Arkansas forms to:

Email: ccbackground.dhs@tn.gov

Fax: 615-532-9956

Mail:

Tennessee Department of Human Services

ATTN: OIG - Background Unit

James K. Polk Building, 15th Floor

505 Deaderick Street

Nashville, TN 37243

\*Disclaimer: Please do not send forms for applicants until at least one day after their fingerprints have been completed. And, please send all forms for each applicant together, including the checklist.