

## Step 1: Consent Form

- <https://aels.ade.arkansas.gov/AELS/Consent/Consent1.aspx>
- SELECT Reason: Teacher (licensure renewal, lifetime license)
- CLICK continue.
- EMPLOYER: IHE Arkansas Tech University
- Fill out applicant information
- **You must print form or Save as PDF when prompted**

## Step 2: Background Check Payment

- [https://www.ark.org/ade/licensure\\_cbc/index.php](https://www.ark.org/ade/licensure_cbc/index.php)
- Choose School District/Location: Arkansas Tech University
- Verification Code: 8800004
- Reason Fingerprinted: EDUC Teacher (Licensure, Renewal, Lifetime)
- **Make sure you have your receipt via email or printing.**

## Step 3: Fingerprinting

- Make your Fingerprinting appointment here at Crabaugh 308.
  - <https://signup.com/go/NWEmkGR>
- For a list of other fingerprinting locations in Arkansas click here:
  - [https://dese.ade.arkansas.gov/Files/20201102144543\\_Live\\_Scan\\_Locations\\_rev\\_10.10.2019web1.pdf](https://dese.ade.arkansas.gov/Files/20201102144543_Live_Scan_Locations_rev_10.10.2019web1.pdf)

### BRING TO APPOINTMENT:

- PRINTED COPY OF CONSENT FORM
- RECEIPT WITH VISIBLE TRANSACTION CODE
- GOVERNMENT ISSUED PHOTO I.D.

## Step 4: Maltreatment Registry Check.

- **OBTAIN REQUEST FORM**
  - [https://ardhs.formstack.com/forms/dcfs\\_central\\_registry\\_request\\_v2](https://ardhs.formstack.com/forms/dcfs_central_registry_request_v2)
  - SELECT You are a teacher, a preservice teacher, work for or attempting to work for a school in Arkansas.
  - APPLICANT TYPE: Licensed Teacher
  - SCHOOL DISTRICT: this will autofill with Department of Ed
  - EMAIL ADDRESS: this will autofill with ADE's email
  - SCHOOL DISTRICT CONTACT NAME: David Bell
  - DISTRICT PHONE: 479-968-0623
  - DISTRICT FAX: 479-964-0811
  - LEA NUMBER: leave this blank
  - SCHOOL MAILING ADDRESS:

- ❖ Crabaugh Hall, Suite 308  
1310 N El Paso Ave  
Russellville, AR 72801



- APPLICANT INFO: Enter your own information accurately (this includes addresses for past 5-years, and any minor children that have lived with you, and any of your own children)
- CLICK the button to have the request form sent to your email
- PRINT the pdf in your email
- **NOTARIZE REQUEST FORM**
  - Take your printed Maltreatment Registry Check request form to a certified Notary.
  - **IF YOU BRING YOUR FORM TO YOUR APPOINTMENT, Ms. Cooper WILL NOTARIZE IT.**
  - SAVE notarized form as a PDF
- **SUBMIT REQUEST FORM AND PAY PROCESSING FEE**
  - <https://ardhs.quickbase.com/db/bqqmshgyk?a=dbpage&pageID=19>
  - SELECT: You are a teacher, pre-service teacher, work for or are attempting to work for a school in Arkansas.
  - APPLICANT TYPE: Licensed Teacher
  - RESUBMISSION: No (Unless DCFS contacts you and requests you resubmit form).
  - REESULTS SHOULD BE RELEASED TO:
    - ❖ Dept. of Education (autofills)
    - ❖ CONTACT NAME: Sylvia Cooper
    - ❖ CONTACT EMAIL: [scooper@atu.edu](mailto:scooper@atu.edu)
  - APPLICANT INFORMATION: Fill out your own information
  - CLICK "Choose File" and upload your notarized form.
  - CLICK Submit
  - On the next page enter your card info to pay the 10-dollar fee (plus 1-dollar card fee) for processing.

## Step 5: Check your Approval Status

- Go to AELS <https://aels.ade.arkansas.gov/AELS/Search.aspx>
- ENTER last four digits of SSN and your Last name (only)
- CLICK "Search"
- When you see your name CLICK "select"
- Your status will be listed under the "employability section"