

If a person is residing, working, or volunteering at a child care facility and is required to be fingerprinted:

- A completed Fingerprint Waiver form must be submitted to KDHE Child Care Licensing (CCL) and Fingerprints taken.
- A "Cleared" status will not be issued until all background checks are completed and fingerprint results are released by KBI. This includes any out-of-state checks. Out-of-state instructions and forms are located at: <https://www.kdhe.ks.gov/282/Out-of-State-Forms-Instructions>



Before you go any further, you will need your **KDHE CLARIS Person ID#** to complete your Fingerprint Waiver form online. If you do not have your **KDHE CLARIS Person ID#**, please contact your child care facility employer for it.

To complete your fingerprint wavier form online:

1. With your **KDHE CLARIS Person ID#**, go to the KDHE Childcare Licensing And Regulation Information System (CLARIS) portal to create your online user account at: <https://claris.kdhe.state.ks.us:8443/claris/public/publicAccess.3mv>
2. Click on the **"Create Person Account"** link.

3. Complete the user account registration following the instructions below.



TEST

Create CLARIS User Profile

Good Beginnings Last a Life Time

Please enter the following:

I am creating a Child Care Account for : Person Registry

Do you have a KDHE Person ID ? Yes
 No

1. Click "Yes" if you have your KDHE Person ID#. You can obtain your ID# from your facility.

Note: If you click "No", additional personal information will be required to be entered. KDHE staff will verify your request within two business days.

Person ID : *

2. Enter your **KDHE Person ID#** obtained from your facility.

Date of Birth : *MMDDYYYY*

3. Enter your **DOB** as MMDDYYYY. Slashes will auto-populate.

Email Address : *

4. Enter your **Email Address**. Verify you entered it correctly so you receive the email with your username and password.

Primary Phone : Ext:
Use numbers only. Special characters are not allowed.

5. Enter your **Primary Phone Number**.



Tip: If you cannot read the characters displayed, click on the icon as many times as needed until you can read the characters displayed.

Retype the characters from the picture:

6. Type the **captcha characters** displayed into the text box.

4. Read through the CLARIS User Security and Confidentiality Agreement and click on the “I Agree” radio button at the bottom of the page and click on **[Add]**.

By Agreeing to this CLARIS User Security and Confidentiality Agreement, I agree to:

- Comply with the provisions of K.S.A. 65-525 concerning the use and dissemination of confidential information contained in CLARIS.
- Comply with Kansas Department of Health and Environment (KDHE) policies and procedures concerning entry of data into CLARIS.
- Carefully and deliberately safeguard my user ID and password which provides access to CLARIS and not permit the use of my user ID and password by any other person, unless expressly authorized by the KDHE Child Care Licensing (CCL) CLARIS Security Manager.
- Promptly, but no later than the close of business, report to the KDHE CCL CLARIS Security Manager any threat to CLARIS or a violation of the CLARIS User Security and Confidentiality Agreement.
- Allow the KDHE CCL staff or assigned agents to audit my CLARIS transactions and agency records to ensure compliance with the CLARIS User Security and Confidentiality Agreement.
- Not attempt to copy the CLARIS database or software without specific written consent from the KDHE CCL CLARIS Security Manager.
- Not attempt to link nor permit others to attempt to link the information contained in CLARIS with personally identifiable records from any other source.
- Comply with applicable state and federal law regarding the use and dissemination of child care facility data and information contained in CLARIS.

I have read, understand, and agree to abide by the CLARIS User Security and Confidentiality Agreement. I understand that the KDHE Child Care Licensing CLARIS Security Manager may terminate my access to CLARIS for any reason. I understand that my access to CLARIS will be terminated for any violations of the CLARIS User Security and Confidentiality Agreement and that I may be subject to penalties imposed by law.

Do you agree with the terms of this usage agreement? I Agree I Do Not Agree

Add **Reset** **Cancel**

5. A message will display to let you know your registration was completed.

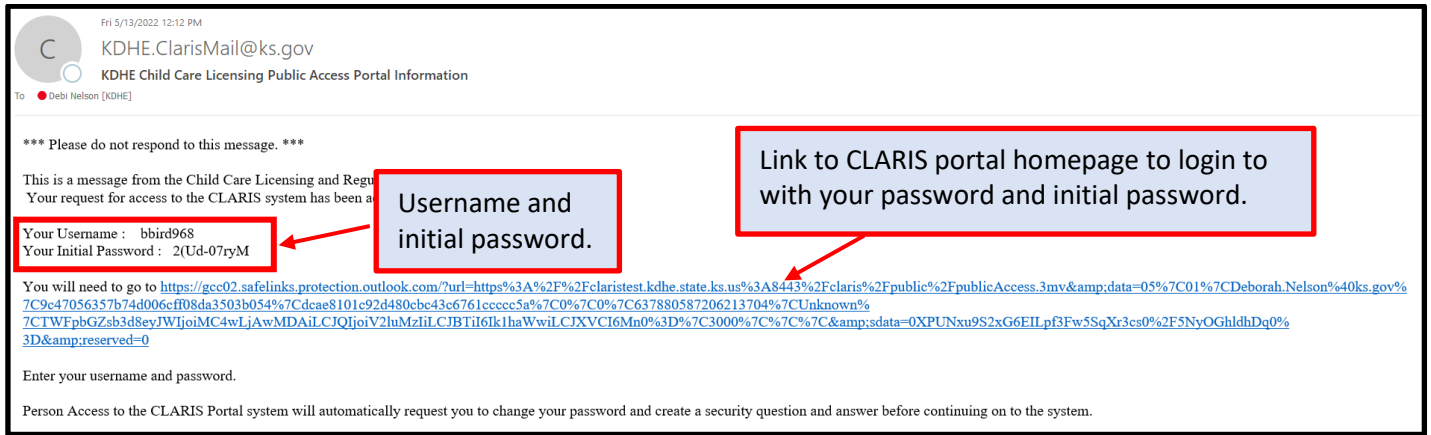
Page Success
You request was successfully submitted.

Thank you for registering for Person access on the CLARIS system. The Child Care Licensing and Regulation Program will review your registration and send you an email with your username and instructions on how to sign in.

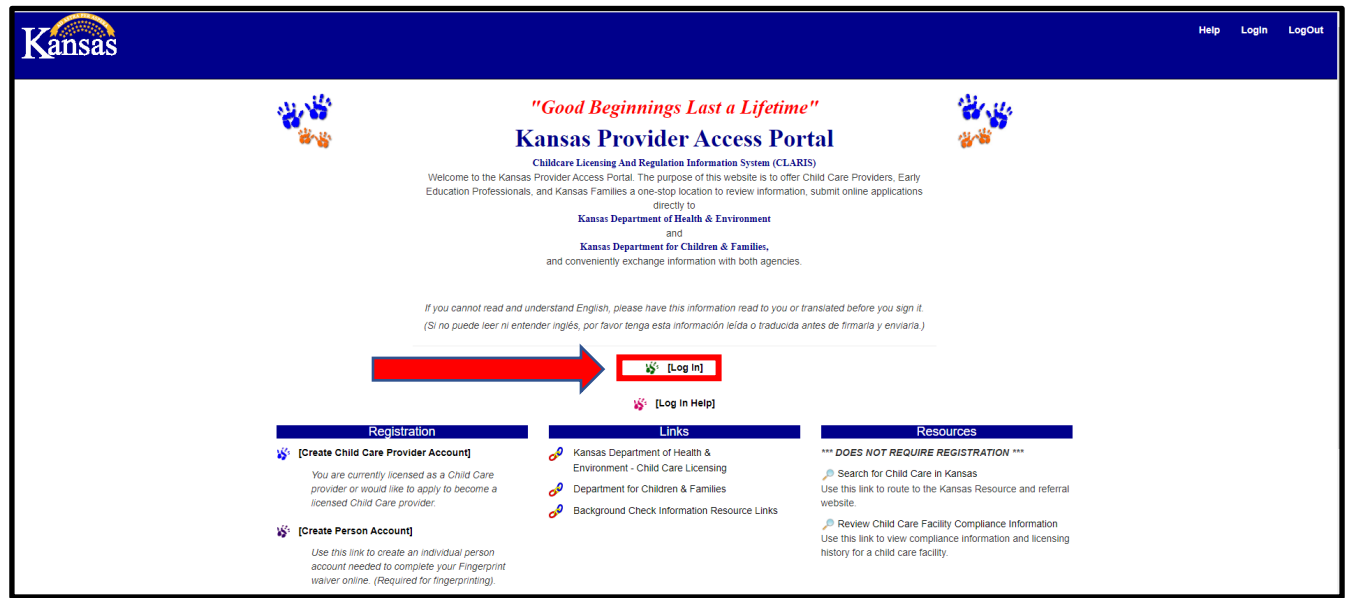
CLARIS Provider Portal

- Wait for a “No Reply” email below from KDHE that will contain your username and initial password. The email normally arrives within a minute. You may need to check your “Junk” folder for the email.

Note: If you did not register with your **KDHE CLARIS Person ID#**, you will not receive the email below until after KDHE staff review and verify your request.
Please allow two business days for KDHE staff to process.



- Login with your username and password by clicking on the “Log In” link.



8. Enter your username and initial password from the email you received and click on [login].

Tip: Copy and paste your initial password from the email making sure to not include any spaces before or after the password to ensure the correct password is entered.

The image shows a screenshot of an email and a login page. The email is from KDHE.ClarisMail@ks.gov to Debi Nelson [KDHE], dated Wed 5/11/2022 3:02 PM. The subject is 'KDHE Child Care Licensing Public Access Portal Information'. The email body contains the following text:

*** Please do not respond to this message. ***

This is a message from the Child Care Licensing and Regulation Program. Your request for access to the CLARIS system has been accepted.

Your Username : jowen383
Your Initial Password : N~XJz(AT-x

The login page below the email has the following text:

Please Enter your system credentials

Username:
Password:

[I forgot my Username]
[I forgot my Password]
[CLARIS Provider Portal]

Security Policy

For site security purposes and to ensure that this service remains available to all users, this government computer system employs software programs to monitor network traffic to identify unauthorized attempts to upload or change information, or otherwise cause damage.

Unauthorized attempts to upload information or change information on this service are strictly prohibited and may be punishable under the Computer Fraud and Abuse Act of 1986 and the National Information Infrastructure Protection Act.

By using this system, the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment. Only employees of the Department of Health and Environment or people granted special permission by Department of Health and Environment are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

By attempting access to this system, you are confirming that you have read, understand, and agree to abide by the acceptable usage policy of this system.

Annotations in the image include:

- A blue arrow pointing from the email's 'Your Username' and 'Your Initial Password' fields to the login page's 'Username' and 'Password' fields.
- A red box around the email's 'Your Username' and 'Your Initial Password' fields.
- A red box around the login page's 'Username' and 'Password' fields with the text 'Enter your username and initial password.' and an arrow pointing to the fields.
- A red box around the 'login' button with the text 'Click [login].' and an arrow pointing to the button.

9. As soon as you enter your username and initial password, you will be prompted to:
- Change your password
 - Create a security question and security answer
- Click **[Update]**.

Change User's Password

My User Profile

User Name	First Name:	Last Name:	Group Manager
cday433	Cold	Day	No

Phone Number:	Email:	Security Agreement Date Signed
3161231234	debi.nelson@ks.gov	05/24/2022

Page Alert

- Your CLARIS password has expired. You must change your password before you may use the CLARIS System. Thank you.

Password requirements:
As see requirement is met a green success message will display below the password field.

- Must include at least:
 - > 12 characters long
 - > 1 lower case letter
 - > 1 upper case letter
 - > 1 number
 - > a special character
- Cannot contain your User Name

In Addition to the requirements above:

- Cannot be one of your last 24 passwords
- Cannot be changed more frequently than every 1 day
- Must be changed every 90 days

Password 0 Characters

Repeat Password

For Security Purposes, you will be asked a question to verify your identify.

You may use any question that you will remember here are a couple of examples.

Example:

- 1) What city was I born in?
- 2) What street did I grow up on?
- 3) What is my favorite sports team?

Security Question :
Security Answer :

The answer you type will be case sensitive and exact.

10. The [Welcome] page will be displayed. Scroll down the page until you see your "Action Items" section.

The screenshot shows the CLARIS website interface. At the top, there is a navigation bar with links for Home and Help, and a welcome message for user 'cd433'. Below this is a menu with categories like Inbox, Facility, Person, Organization, Training, FeeBatch, Administration, and Help. The main content area is titled 'Welcome My Profile' and includes a 'TEST' status bar. A green success message states 'The password was changed successfully.' The page features the slogan 'Good Beginnings Last a Lifetime' and contact information for the Child Care Licensing Program. A 'Welcome Cold Day!' message is followed by a 'Please note' section regarding fingerprinting requirements. A 'Steps for Fingerprinting' section lists six steps, including completing a waiver, background checks, picking up a packet, finding a location, getting fingerprinted, and mailing the card. The 'Action Items' section is highlighted with a red box and contains a table with one entry: 'Fingerprint Waiver required' for 'A Stepping Stone Daycare' due on '06/07/2022'. Below the table is a filter option and a 'Resource Links' section with two links: '[How to submit your Fingerprint waiver form online]' and '[Child Care Licensing Background Check Information]'. A red diagonal line is drawn across the entire page.

Page Success
 • The password was changed successfully.

Good Beginnings Last a Lifetime

Child Care Licensing Program
 Bureau of Family Health
 Division of Public Health
 Kansas Department of Health and Environment
 1000 SW Jackson, Suite 200
 Topeka, KS 66612
 Phone (785) 296-1270 Fax (785) 559-4244
 cclr@kdhhs.gov

Welcome Cold Day!

Please note: If you are doing your fingerprints at a Live Scan location (digital prints), you are required to provide Child Care Licensing ORI number KS920100Z, authorization to be fingerprinted.

Steps for Fingerprinting:

1. Complete and submit your waiver below.
2. Out-of-State Background Check(s): If you currently live or have lived in a state other than Kansas within the last 5 years, additional information is required to comply with federal requirements. Please go to our website at [Out of State Background Checks] for information, instructions, and forms required.
3. Pickup a Fingerprint packet. A list of locations available at: [County Contacts]
4. Find the nearest fingerprinting location at [Authorized Fingerprinting Locations]
 Note: Some locations have limited hours require appointments and may charge a fee for fingerprinting.
5. Get Fingerprinted. Follow instructions in the fingerprint packet. Please note that a unique OCA number assigned to you is required to be on the fingerprint card.
6. Mail completed fingerprint card using envelope included in fingerprint packet to KDHE Child Care Licensing.

Note: Add correct postage to pre-addressed envelope before mailing. If you submit your waiver online, KDHE will receive it electronically and you do not need to send a waiver with your fingerprint card.

Action Items [History]

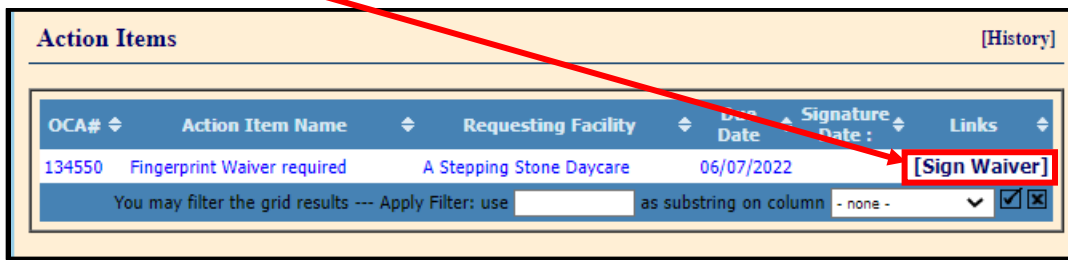
OCA#	Action Item Name	Requesting Facility	Due Date	Signature Date	Links
134550	Fingerprint Waiver required	A Stepping Stone Daycare	06/07/2022		[Sign Waiver]

You may filter the grid results --- Apply Filter: use as substring on column - none -

Resource Links

- [How to submit your Fingerprint waiver form online]
- [Child Care Licensing Background Check Information]

11. Click on the **[Sign Waiver]** link.

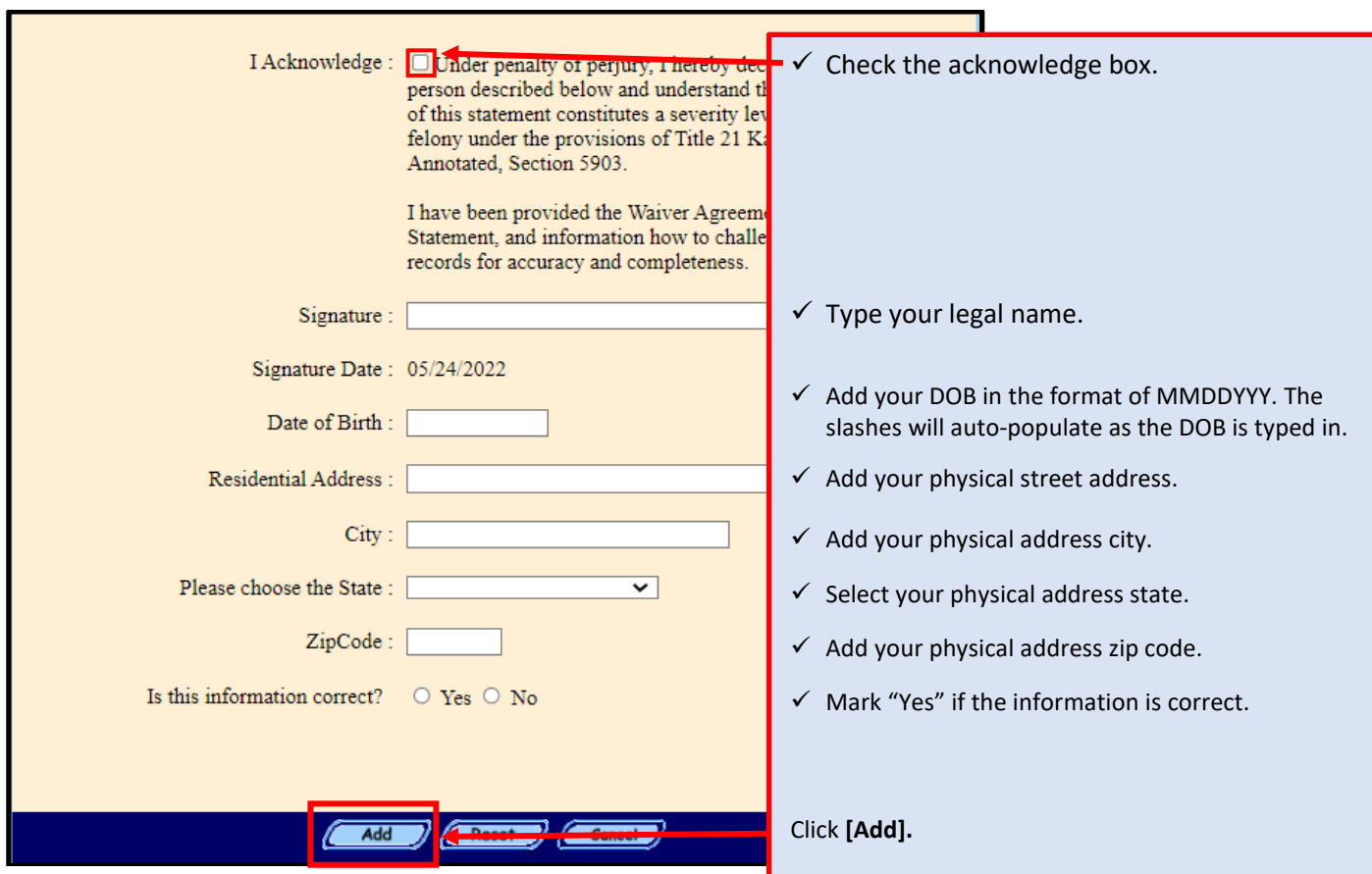


OCA#	Action Item Name	Requesting Facility	Date	Signature Date	Links
134550	Fingerprint Waiver required	A Stepping Stone Daycare	06/07/2022		[Sign Waiver]

You may filter the grid results --- Apply Filter: use as substring on column

12. Read through all three pages of the KDHE Child Care Licensing Waiver Agreement and FBI Privacy Act Statement.

13. At the bottom of the agreement, sign your fingerprint waiver form.



I Acknowledge : Under penalty of perjury, I hereby declare that I am the person described below and understand that the signing of this statement constitutes a severity level 3 felony under the provisions of Title 21 K.S.A. 21-2401 Annotated, Section 5903.

I have been provided the Waiver Agreement and Privacy Act Statement, and information how to challenge records for accuracy and completeness.

Signature :

Signature Date : 05/24/2022

Date of Birth :

Residential Address :

City :

Please choose the State :

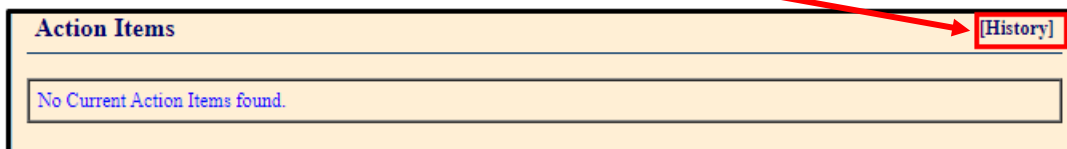
ZipCode :

Is this information correct? Yes No

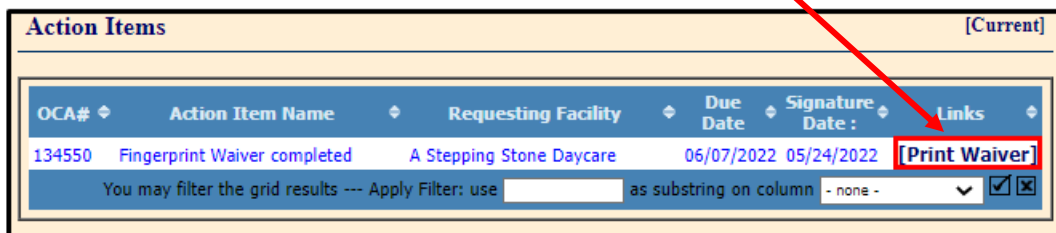
- ✓ Check the acknowledge box.
- ✓ Type your legal name.
- ✓ Add your DOB in the format of MMDDYYYY. The slashes will auto-populate as the DOB is typed in.
- ✓ Add your physical street address.
- ✓ Add your physical address city.
- ✓ Select your physical address state.
- ✓ Add your physical address zip code.
- ✓ Mark "Yes" if the information is correct.

Click **[Add]**.

14. If you completed your online waiver form correctly, a copy of your waiver has been sent to KDHE CCL. **Do not mail a copy of the waiver to KDHE CCL.**
15. If you want a copy of your signed completed waiver, from the **[Welcome]** page, scroll back down to your **“Action Items”** section and click on the **[History]** link.



16. Scroll back down to your **“Action Items”** section and click on **[Print Waiver]**.



17. A copy of your completed signed waiver will be displayed in PDF format.
18. To logout, scroll to the top of the page and click on **[Log Out]**.

