



AFFIDAVIT OF GOOD MORAL CHARACTER

State of Florida

County of _____

Before me this day personally appeared _____ who, being duly sworn, deposes and says:

I am an applicant for employment as a caretaker (or similar position requiring level 2 screening under Chapter 435, Florida Statutes), or I am currently employed as a caretaker with:

By signing this form, I am swearing that I have not been found guilty or entered a plea of guilty or nolo contendere (no contest), regardless of the adjudication, to any of the following charges under the provisions of the Florida Statutes or under any similar statute of another jurisdiction. I also attest that I do not have a delinquency record that is similar to any of these offenses.

I understand I must acknowledge the existence of any criminal records relating to the following list regardless of whether or not those records have been sealed or expunged. I understand that I am also obligated to notify my employer of any possible disqualifying offenses that may occur while employed in a position subject to background screening under Chapter 435, Florida Statutes.

Relating to:

- Sections: 393.135 relating to sexual misconduct with certain developmentally disabled clients
- 394.4593 relating to sexual misconduct with certain mental Health patients
- 415.111 adult abuse, neglect, or exploitation of aged persons or disabled adults
- 741.30 domestic violence and injunction for protection (defined in 741.28) means any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, etc. of a family or household member
- 782.04 murder
- 782.07 manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child
- 782.071 vehicular homicide
- 782.09 killing an unborn child by injury to the mother
- 784.011 assault, if the victim of offense was a minor
- 784.021 aggravated assault
- 784.03 battery, if the victim of offense was a minor
- 784.045 aggravated battery
- 784.075 battery on a detention or commitment facility staff
- 787.01 kidnapping
- 787.02 false imprisonment
- 787.04(2) taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceedings
- 787.04(3) carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person
- 790.115(1) exhibiting firearms or weapons within 1,000 feet of a school
- 790.115(2)(b) possessing an electric weapon or device, destructive device, or other weapon on school property
- 794.011 sexual battery
- 794.041 prohibited acts of persons in familial or custodial authority (former)
- Chapter: 796 prostitution
- Section: 798.02 lewd and lascivious behavior
- Chapter: 800 lewdness and indecent exposure
- Section: 806.01 arson
- Chapter: 812 felony theft and/or robbery and related crimes, if a felony
- Sections: 817.563 fraudulent sale of controlled substances, if the offense was a felony
- 825.102 abuse, aggravated abuse, or neglect of disabled adults or elderly persons
- 825.1025 lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult
- 825.103 exploitation of disabled adults or elderly persons, if the offense was a felony
- 826.04 incest
- 827.03 child abuse, aggravated child abuse, or neglect of a child

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- 827.04 contributing to the delinquency or dependency of a child
- 827.05 negligent treatment of children
- 827.071 sexual performance by a child
- 843.01 resisting arrest with violence
- 843.025 depriving an officer means of protection or communication
- 843.12 aiding in an escape
- 843.13 aiding in the escape of juvenile inmates in correctional institution
- Chapter: 847 obscene literature
- Section: 874.05(1) encouraging or recruiting another to join a criminal gang
- Chapter: 893 drug abuse prevention and control only if the offense was a felony or if any other person involved in the offense was a minor
- Sections: 916.0175 relating to sexual misconduct with certain forensic clients
- 944.35(3) inflicting cruel or inhuman treatment on an inmate resulting in great bodily harm
- 944.46 harboring, concealing, or aiding an escaped prisoner
- 944.47 introduction of contraband into a correctional facility
- 985.4045 sexual misconduct in juvenile justice programs
- 985.4046 contraband introduced into detention facilities

ONE OF THE FOLLOWING STATEMENTS MUST BE MADE:

Under the penalty of perjury, which is a first degree misdemeanor, punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding \$1,000 pursuant to ss.837.012, or 775.082, or 775.083, Florida Statutes, I attest that I have read the foregoing, and I am eligible to meet the standards of good character for this caretaker position.

Signature of Affiant

OR

To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

Signature of Affiant

OR

for teachers and non-instructional personnel in lieu of fingerprint submission:

I swear that I have been fingerprinted under Chapter 1012, Florida Statutes, when employed as a teacher or non-instructional employee and have not been unemployed from the school board for more than 90 days. I swear the findings of that background check did not include any of the above offenses and that I meet the standards of good character for this caretaker position.

Signature of Affiant

OR

To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

Signature of Affiant

Sworn to and subscribed before me this _____ day of _____, _____

My commission expires

NOTARY PUBLIC, STATE OF FLORIDA

My signature, as a Notary Public, verifies the affiant's identification has been validated by

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AFFIDAVIT OF GOOD MORAL CHARACTER

Required Addendum for Foster Care and Adoption Applicants

State of Florida

County of _____

Before me this day personally appeared _____ who, being duly sworn, deposes and says:

I am an applicant for foster care or adoption:

By signing this form, I am swearing that I have not been convicted of any of the following offenses identified by the Federal Adoptions and Safe Family Act and Section 435.045, Florida Statutes, as prohibitive for persons wishing to provide foster care or adopt a child subject to a placement decision pursuant to Chapter 39, Florida Statutes. I understand this affidavit applies to the Florida Statutes or any similar statute of another jurisdiction.

I understand I must acknowledge the existence of any criminal records relating to the following list regardless of whether or not those records have been sealed or expunged. I understand that I am also obligated to notify the Department of Children and Families or the Community-Based Care Provider of any possible disqualifying offenses that may occur pending the finalization of an adoption or while licensed to provide foster care.

*I understand that approval shall **NEVER** be granted when a record check reveals a felony conviction for:*

*Child abuse, abandonment or neglect, Spousal abuse, A crime against children, including child pornography, A crime involving violence, including rape, sexual assault, or homicide, BUT not including other physical assault or battery, if the Department finds that the felony was committed at **ANY** time.*

*I understand that approval shall **NOT** be granted when a record check reveals a felony conviction for:*

Physical assault, Battery, or a Drug-related offense, if the Department finds that a court of competent jurisdiction has determined that the felony was committed within the past 5 years.

Under the penalty of perjury, which is a first degree misdemeanor, punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding \$1,000 pursuant to ss.837.012, or 775.082, or 775.083, Florida Statutes, I attest that I have read the foregoing, and I am eligible to meet the standards of good character for foster care or adoptions.

Signature of Affiant

OR

To the best of my knowledge and belief, my record may contain one or more of the foregoing disqualifying acts or offenses.

Signature of Affiant

MY COMMISSION EXPIRES NOTARY PUBLIC, STATE OF FLORIDA

My signature, as a Notary Public, verifies the affiant's identification has been validated by

_____.