Background Check Checklist:

To be Used by QEIs, QEDs, or CHADS *to Gather Information Needed to Submit a Background Check into ORCHARDS*

With ORCHARDS, the Background Check Unit is no longer using the background check request form (MSC301) or its various versions. This system is meant to work paperlessly. However, you can use this checklist to gather information you will need about a subject individual (SI) when submitting a new background check request into ORCHARDS. See page 2 for more information on Dropdowns mentioned in the list below.

Subject individual (SI) Information	**Required Fields Marked with Asterisk (*)**
□	Social Security # *(Note This is voluntary. The SI must approve)*:
□	*Complete Name:
□	*Date of birth (mm/dd/yyyy):
□	*Residential address:
□	Mailing address (if different):
□	*Prior names and aliases:
□	*Gender: □Male □Female □Unknown/Not Specified □Other □Both
□	*Phone: *Type of Phone (home, mobile, etc.):
□	2nd Phone: Type Phone:
□	*Email:
□	Residential History outside OR past five years (specific years and address, especially city and state; SI will also disclose this):
Pre-Employment Information	**Required Fields Marked with Asterisk (*)**
□	*Provider (Already listed or from dropdown):
□	*Request type (From dropdown):
□	*Position Category (Already listed or from dropdown):
□	*Position (From dropdown):
□	*Position Description (include worksite location; you can also upload on Verify Identity page):
□	*Employee Type (from dropdown):
□	Position Requires Direct Contact with: □Adults □Children □Confidential Information □Finances/Financial Records □Information Technology Systems □Secure Facilities □Seniors
□	Position Requires: □Driving
	□ CJIS Clearance *(only for ODHS|OHA Human Resources and if SI needs this)*
Applicant: Verify Identity	**Required Fields Marked with Asterisk (*)**
□	*Document (from dropdown in ORCHARDS):
□	*Issuing State/Authority:
□	*Document Number:
□	Expiration Date:
□	Identity Document to upload (can be .doc, .pdf, .jpg, etc.).

Dropdown Details

Provider dropdown: If you are associated with more than one qualified entity (QE), or your QE is split into different CMS requirements, you will see a dropdown. Choose the correct QE where the SI will be working.

Request Type: Request types (formerly called app types) are specific to each QE and will determine other fields on this page. Choose the correct request type for your SI.

Position Category: If this is not already listed, you will need to choose the correct CMS category from the following:

- Executive, Administrative, Managerial
- Professional/Licensed Health Care
- Technical, Unlicensed Health Care (including AFH paid and HCWs)
- Laboratory and Radiology Services
- Food and Dietary Services
- Housekeeping and Engineer Services
- Any other direct access employee

Position: All position titles are now in a dropdown list. If you do not see the SI's position, you may have chosen the incorrect Request Type or Position Category. **If you still cannot find the Position Title, please choose "other," include the position and full description in the Position Description box, and send an email to bcu.info@odhsoha.oregon.gov with your agency, request type, and needed position.**

Employee Type: Depending on the request type you have chosen you will see one or more of the following. Choose one:

- Employee
- Contractor
- Employment Agency
- Volunteer/Student
- Not Providing Care
- Licensee
- Owner
- Household Member

[Identity] Document: You can confirm an SI's identity with a government-issued photo identification. The following are listed in ORCHARDS:

- Oregon State Issued Driver's License
- Oregon State Issues Identification Card
- Non-Oregon State Issued Driver's License
- Non-Oregon State Issued Identification Card
- United States Armed Forces ID
- Passport
- Visa
- High School/College ID
- Other Government-Issued Photo ID