



DELAWARE HEALTH & SOCIAL SERVICES
Division of Long Term Care Residents Protection
Adult Abuse Registry
3 Mill Road, Suite 308
Wilmington, DE 19806

**AUTHORIZATION TO
DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF LONG TERM CARE RESIDENTS PROTECTION
FOR THE RELEASE OF ADULT ABUSE REGISTRY INFORMATION**

Employer: A.I duPont Hospital for Children / Certiphi

Address: 1600 Rockland Road

Wilmington, DE 19803

Attn: Jamie Stafford

I hereby authorize the indicated employer to obtain from the Division of Long Term Care Residents Protection any information concerning me which may be on the Adult Abuse Registry pursuant to 11 Del. C., § 8564.

APPLICANT:

NAME

SOCIAL SECURITY NUMBER

SIGNATURE

DATE

WITNESS:

PRINT NAME

DATE

SIGNATURE

5/13/14