2022-23 Family Care Safety Registry

- In the fall of 2021, Republic R-III School District began using the MO-DHSS Family Care Safety Registry as a new clearance system for school volunteers. Cleared volunteer lists do not carry over to the next school year. RSD requires a new submission each year beginning on or after July 1st.
- This process requires two steps:
  - 1) Register with the FCSR - OR - Update your current information with the FCSR
  - 2) Return this completed FCSR paper form (page 2) to your student’s school
- The FCSR is a one-time, online registration with a $15.25 fee for new volunteers. Registration and payment will be the responsibility of the volunteer.
- Confidential information included on this form will be stored in a locked filing cabinet at Central Office and destroyed after each school year.

Family Care Safety Registry for a New Volunteer

How do I register? Start Here →

1. The web address for the FCSR is: https://healthapps.dhss.mo.gov/bsees/main.aspx. You can click the link provided or copy and paste the web address into your browser. ***MOBILE DEVICES NOT RECOMMENDED***
   a. Hover over the Registration tab and click Register Online in the submenu to begin registration.
   b. Click the tab for Is A Person Registered.
   c. Enter your social security number, check “I am not a robot” and click the Search button.

2. If you are notified that your social security number WAS found in the database, turn this form over and proceed with the instructions on the back.

3. If you are notified that your social security number was NOT found in the database, follow these instructions to register first before submitting this paper form to your student’s school:
   a. Click Continue to proceed with registration.
   b. Choose Volunteer/Voluntary as your selection criteria in the drop-down menu.
   c. Complete and pay for your registration. This is a life-time registration and will not have to be repeated. Changes in personal information (name, address, etc) should be updated annually.

4. Fill out the requested information on the other side of this form and return it to your student’s school. For legal reasons, an email or letter from FCSR will not be accepted as a cleared status. RSD will request a cleared status from MO-DHSS with the information provided on the back of this paper form.

Take note that the wait time for the FCSR registration to be processed at the state level and for the district to be notified can be up to 30 business days. We recommend completing this process at the beginning of each school year so that you can take advantage of every volunteer opportunity when available.
Family Care Safety Registry For Returning Volunteers

Returning Volunteer or Already Registered? Start Here →

Make sure you are registered and your information is up to date!

1. The web address for the FCSR is: https://healthapps.dhss.mo.gov/bsees/main.aspx. You can click the link provided or copy and paste the web address into your browser. ***MOBILE DEVICES NOT RECOMMENDED***
   a. Hover over the Registration tab and click Register Online in the submenu to begin registration.
   b. Click the tab for Is A Person Registered.
   c. Enter your social security number, check “I am not a robot” and click the Search button.

2. **If you are notified that your social security number WAS found in the database, please call** 1-866-422-6872 to verify or update your information. **Failure to update information may result in delays or rejection of your clearance status.**

3. Complete this FCSR paper form (page 2) and return it to your student’s school. For legal reasons, an email or letter from FCSR will not be accepted as a cleared status. RSD will request a cleared status from MO-DHSS with the information provided below.

Applicant: __________________________  _____  __________________________  _____
                      First Name  MI  Last Name  Suffix

Address: ________________________________________________________________
                      __________________________  _____
                      City  State  Zip Code

SSN: __________________________  DOB: __________________________
          *Required           *Required (MM-DD-YYYY)

Email: ________________________________________________________________

Which school(s) will you be volunteering at (circle all that apply):

EC  Lyon  McCulloch  Price  Schofield  Sweeny  RMS  RHS

Signature: __________________________  Date: __________________________

By submitting this form, I acknowledge that the Republic R-III School District will be using this information to request a background screening. Screening results will determine if I am eligible for employment or to act as a volunteer.