



### Affidavit of Good Moral Character

It is required that you sign an Affidavit of Good Moral Character. In order to complete this form, please fill in your county of residence and name at the top of the first page. Read completely. Sign in front of a notary and date in the appropriate box on the second page. If you prefer, please wait to sign this form until your home study visit and your social worker can notarize this form for you.

This form needs to be completed by each person in the home over the age of 18.



# 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 or licensure 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 or affirming 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 failure to report 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

**CONTINUED ON NEXT PAGE**

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: 916.1075	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 state correctional facility
985.701	sexual misconduct in juvenile justice programs
985.711	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 or affirm 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