

## **Ohio Department of Developmental Disabilities Certification Application Checklist**

**Applications for certification must be completed online. You will be required to provide proof that you meet the requirements of the certification rule. Be prepared with the items on the checklist below. This list is for independent providers of homemaker/personal care, HPC transportation, adult family living, informal respite (non-family member), community inclusion – personal assistance and community inclusion-transportation.**

- Proof that you have completed the required 8 hours of training for new providers: This may be an online or in person and must include:
  - Overview of serving individuals with DD including implementation of ISPs,
  - Role and responsibilities of independent provider with regard to services including person-centered planning, community integration, self-determination and self-advocacy
  - Blood Borne Pathogens/Universal precautions for infection control
  - Rights of Individuals
  - MUI Rule 5123:2-17-02 including Health and Welfare Alerts issued by the Department
- Proof that you have completed the DODD online Independent Provider Orientation training, found on the DODD website at [www.dodd.ohio.gov](http://www.dodd.ohio.gov)
- Proof that you are at least 18yrs old (must be a copy of your birth certificate)
- Copy of your High School Diploma or GED (an Associates, BA or MA will also be accepted)
- Copy of your current CPR card (no online classes)
- Copy of your current First Aid card (no online classes)
- Copy of your social security card
- Copy of your driver's license, state id or other government issued id
- \*Copy of your Ohio BCI&I background check (not more than 12 months old)
- \*Copy of your Federal BCI&I background check (only required if you have not lived in Ohio for the past five years, not more than 12 mons old)
- Copy of your auto insurance (must have your name listed)
- Copy of your Driver's abstract (must be an OFFICAL copy obtained by the BMV, not more than 14 days old)
- A copy of a current utility bill if your current address is not reflected on your driver's license/state id
- \$125.00 application fee via credit card or electronic check
- FYI - There will also be forms for you to print and sign from your online application

\*BCI check must be submitted under the following reason code: "Applicant for Supported Living Certification"

\*FBI checks must be submitted under the following reason code: "Employment with DODD"

\*BCI and FBI checks MUST be sent directly to the Ohio Department of Developmental Disabilities at the following address:

Ohio Department of Developmental Disabilities  
ATTN: Provider Certification  
30 E. Broad Street, 13<sup>th</sup> Floor  
Columbus, OH 43215

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