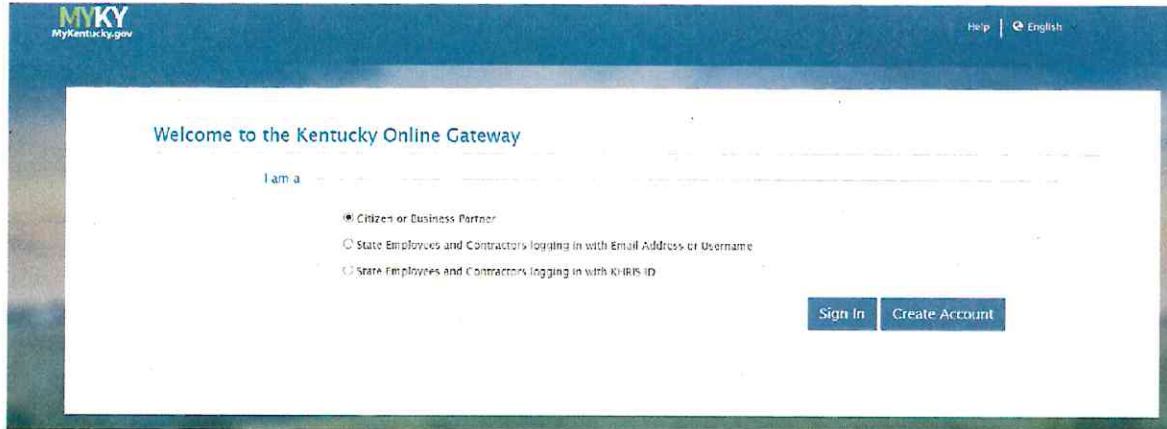


# KOG Onboarding for CAN Check Requests

Open your browser and enter the following URL <https://ssointernal.chfs.ky.gov>.



Select **Citizen or Business Partner**. Click on **Create Account** button.

## Please complete your Kentucky Online Gateway Profile

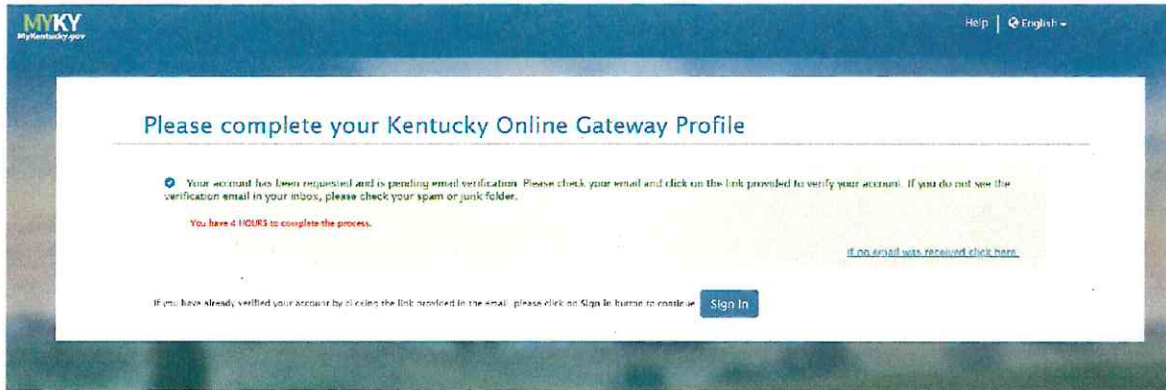
ⓘ If you already have an existing Kentucky Online Gateway (KOG) Account, please click [here](#) to reset your password OR click on the **Cancel** button below to log into your account.

Please fill out the form below and click **Sign Up** when finished  
All fields with \* are required.

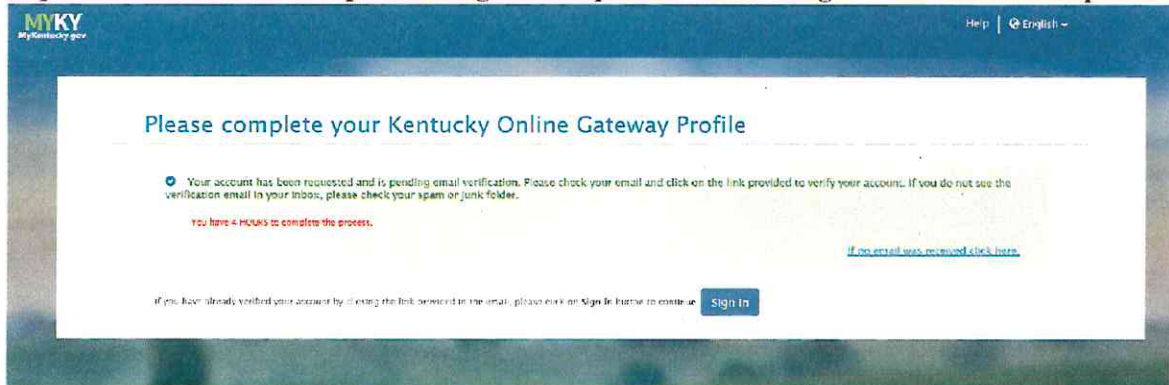
* First Name	Middle Name	* Last Name
* E-Mail Address		* Verify E-Mail Address
* Password		* Verify Password
Mobile Phone		Language Preference English
Street Address 1		Street Address 2
City		State Kentucky
Zip Code		
Question In what city were you born? (Enter full name of city only)		* Answer
Question What was the name of your first pet?		* Answer

**Cancel** **Sign Up**

Enter the required information on the displayed screen and click the **Sign Up** button to complete your KOG Profile. **NOTE: The provided E-Mail address will be used for the account username.**



A success message is displayed if required information was submitted. An E-Mail from [KOG\\_DoNotReply@ky.gov](mailto:KOG_DoNotReply@ky.gov) is automatically sent to the E-Mail address provided. **NOTE: The requestor has 4 hours to complete the registration process or a new registration must be completed.**



Access your E-Mail account and click on the activation link in the **Account Verification E-Mail** to complete validation of the requested KOG profile.

This email is to help you complete the last step of account set-up.

Your Citizen account username: [REDACTED]

Click on the below link now, to activate your account.

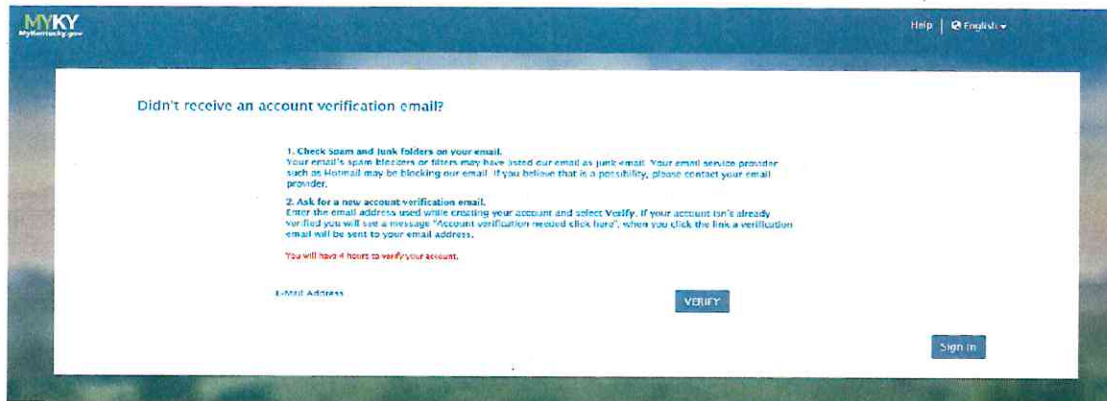
<https://kog.chfs.ky.gov/public/fwlink?linkid=14406a3f-4cdd-4e05-8332-67b6d1bf83a3>

[Click here for Help Desk contact information](#)  
Kentucky Online Gateway

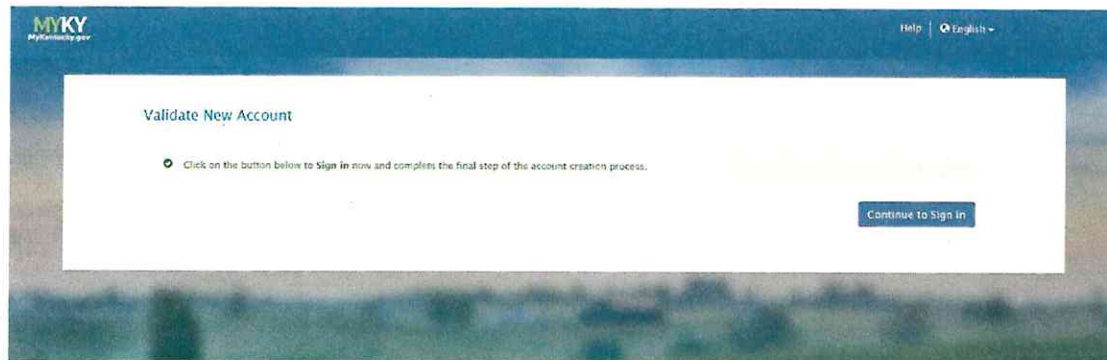
**NOTE:** Do not reply to this email. This email account is only used to send messages.

**Privacy Notice:** This email message is only for the person it was addressed to. It may contain restricted and private information. You are forbidden to use, tell, show, or send this information without permission. If you are not the person who was supposed to get this message, please destroy all copies.

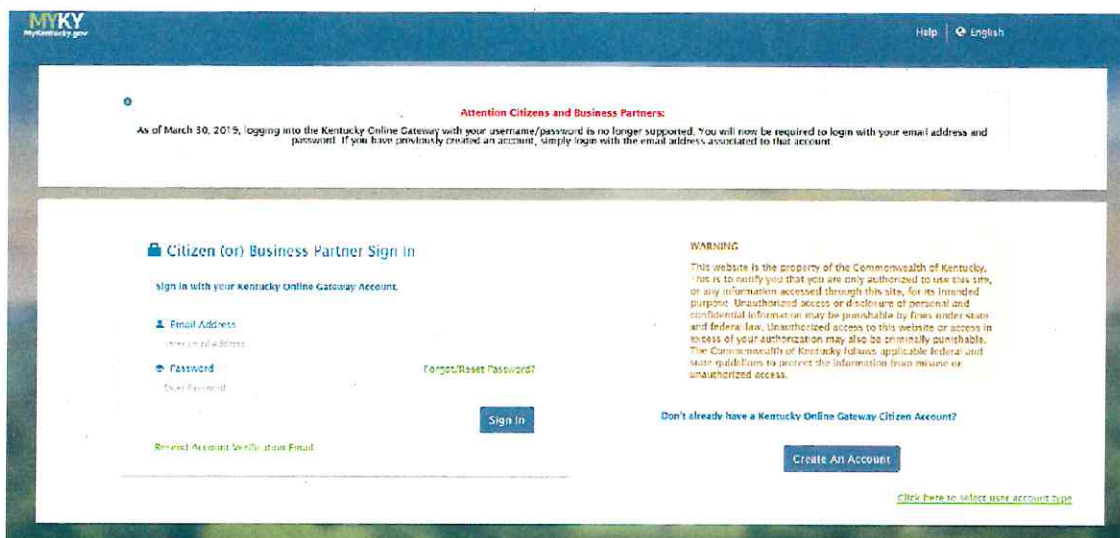
If an E-Mail is **not** received within 30 minutes, click on the **No E-Mail received** link. Enter the previously provided E-Mail address and click **Verify** to resend E-Mail.



Once the user clicks on the E-Mail activation link the requestor will be sent to the **Validate New Account** screen, where they will be prompted to **Continue to Sign In**.



User will be redirected to the **KOG External Gateway Log In** screen. (You may want to save the URL to your Favorites.) Enter your username and password and click **Sign In**.

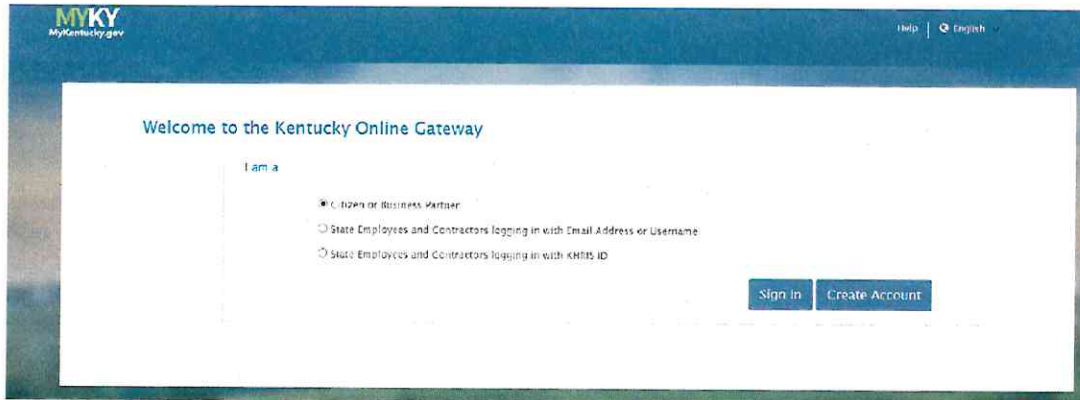




# CAN Check Request User Guide

Open your browser and enter the following URL <https://ssointernal.chfs.ky.gov>.

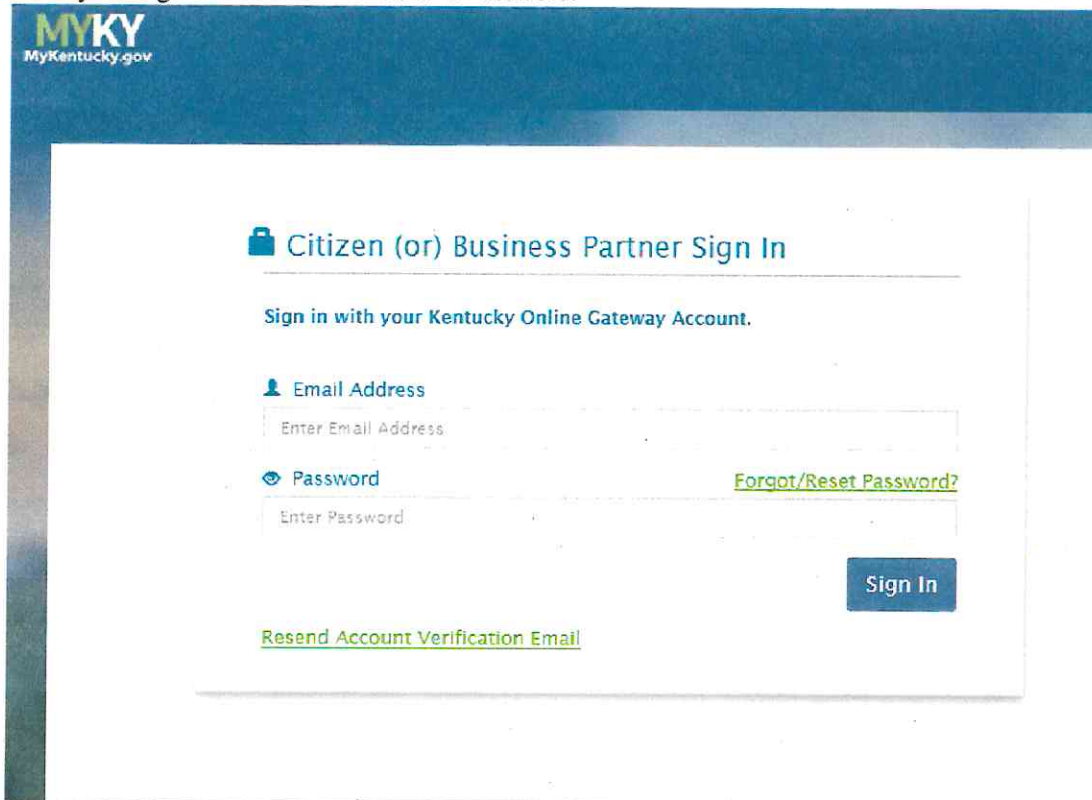
Select **Citizen or Business Partner** and Select **Sign In**



The screenshot shows the 'Welcome to the Kentucky Online Gateway' page. At the top left is the 'MYKY MyKentucky.gov' logo. At the top right are links for 'Help' and 'English'. The main content area has a heading 'Welcome to the Kentucky Online Gateway' and a section titled 'I am a' with three radio button options: 'Citizen or Business Partner' (which is selected), 'State Employees and Contractors logging in with Email Address or Username', and 'State Employees and Contractors logging in with KHHS ID'. At the bottom right of the form area are two buttons: 'Sign In' and 'Create Account'.

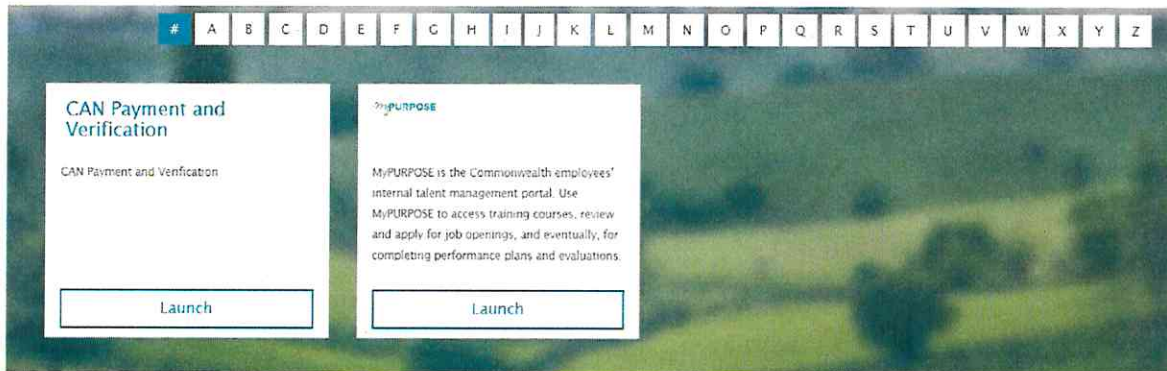
Refer to the **KOG Onboarding for CAN Check Requests Guide** if you do not have a Kentucky Online Gateway account.

Enter your registered E-mail address and Password.



The screenshot shows the 'Citizen (or) Business Partner Sign In' page. At the top left is the 'MYKY MyKentucky.gov' logo. The main heading is 'Citizen (or) Business Partner Sign In'. Below the heading is the instruction 'Sign in with your Kentucky Online Gateway Account.' There are two input fields: 'Email Address' with a placeholder 'Enter Email Address' and 'Password' with a placeholder 'Enter Password'. To the right of the password field is a link 'Forgot/Reset Password?'. At the bottom right is a 'Sign In' button. At the bottom left is a link 'Resend Account Verification Email'.

Select the letter "C" from the alphabet list and select **CAN Payment and Verification (Child Abuse and Neglect)** from the application list and click **Launch**.



The CAN Check Home screen will be displayed.



Select the desired request type from the **Form** dropdown (DCC-374 for Child Care Central Registry Checks or DPP-156 for Central Registry Checks)



Sections of the selected form annotated with a red \* are mandatory fields (Middle Name and Nick Name/Maiden name can have N/A entered if not applicable). A proof of ID (driver's license, birth certificate, or Social Security card) photograph must be attached to each request.

Approved file types are as follows:

- .JPEG
- .PNG
- .BMP
- .PDF

\* STATE AND/OR FEDERAL LAW REQUIRES A CHILD ABUSE/NEGLECT (CAN) CHECK AS A CONDITION OF EMPLOYMENT OR SERVICE AS A CHILD CARE/DAY CARE STAFF MEMBER FOR THE FOLLOWING:

A Licensed Child Care Center Employee, Volunteer, or Adult Household Member (922 KAR 2:090)  
 A Certified Family Child-Care Home Employee, Volunteer, or Adult Household Member (922 KAR 2:100)  
 A Registered Child Care Provider Applicant or Adult Household Member (922 KAR 2:180)  
 Private Child Care Employee (KRS 199.466)  
 Out of State Child Care Employee (42 U.S.C. 9658, 45 C.F.R. 90.43)

Other  
 (If none of the above category is applicable, please explain the reason for requesting a child abuse or neglect check, including the statutory or regulatory authority for the request):

---

**Personal Information**

Personal information regarding the individual submitting to a child abuse or neglect check

\*First Name  Ex: John  
 \*Last Name  Ex: Smith  
 Middle Name  Ex: Joseph  
 Nick Name  Ex: John  
 \*Sex  -- Please select a Sex --  
 \*Race  -- Please select a Race --  
 \*Date of Birth  MM/DD/YYYY  
 \*Social Security #  XXX-XX-XXXX  
 \*Date of Initial Hire  MM/DD/YYYY

---

**Current Address**

\*Address Line 1  Ex: 123 Main St  
 Address Line 2  Ex: Apt 1000, Box 200  
 \*City  Ex: Louisville  
 \*State  -- Please select a State --  
 \*Zip Code  Ex: 10245  
 \*Living at the current address longer than 5 Years? \* Yes  No

---

**Employer / Agency Information**

In addition to receiving the results myself, I authorize the Cabinet for Health and Family Services to share the results with the following employer or agency  
 Sherri.hoskins@mboro.kyschools.us

---

**View / Upload Documents**

\*Upload Supporting Document  
 No file chosen

To Save the current request to your dashboard prior to payment select **Save**.

To Save and additional requests to submission (up to 10 CAN checks per submission) select **Save and Add Applicant**.

To submit requested CAN Check(s) for payment select **Submit**.

The screenshot shows a form titled "Current Address" with the following fields and options:

- Address Line 1:** Text input field with placeholder "Ex: 123 Main St".
- Address Line 2:** Text input field with placeholder "Ex: Apt 110 - Suite 700".
- City:** Text input field with placeholder "Ex: Frankfurt".
- State:** Dropdown menu with placeholder "-- Please select a State --".
- Zip Code:** Text input field with placeholder "Ex: 12345".
- Living at the current address longer than 5 Years?** Radio button options for "Yes" and "No".

Below the address section is the "Employer / Agency Information" section with a checkbox: "In addition to receiving the results myself, I authorize the Cabinet for Health and Family Services to share the results with the following employer or agency".

The "View / Upload Documents" section includes an "Upload Supporting Document" button with a "Choose File" link and a note "No file chosen". An "Upload" button is also present.

At the bottom right, there are three buttons: "Save & Add Applicant" (green), "Save" (green), and "Submit" (green).

Upon Submission, you will be presented with the payment selection screen.

The screenshot shows a form titled "Customer" with the following content:

If you have a Agency Payment Code select check and proceed, if you do not have the code please click the button to continue.

Do you have Agency Payment Code?  Agency Payment Code  Pay by Credit/Debit Card

**Proceed to E-Sign** (button)

If you work for an organization that has been issued a payment processing code select **Agency Payment Code**. Select your customer organization from the drop down and enter the assigned Agency Payment Code for your selected organization. Then Select **Proceed to E-Sign**.

The screenshot shows a form titled "Customer" with the following content:

If you have a Agency Payment Code select check and proceed, if you do not have the code please click the button to continue.

Do you have Agency Payment Code?  Agency Payment Code  Pay by Credit/Debit Card

Select customer type:

Agency Payment Code:

**Proceed to E-Sign** (button)



If you wish to pay by credit card/debit card select **Pay by Credit/Debit Card**. Then select **Proceed to E-Sign**.

Confirm your electronic signature and select **Sign and Pay**.

**E-Signature**

I hereby authorize the Cabinet for Health and Family Services to complete a Child Abuse or Neglect check and to submit the results of the check to me and, on my behalf, to the employer or agency listed. I also release the Cabinet for Health and Family Services, its officers, agents, and employees, from any liability or damages resulting from the release of this information. All the information provided is complete and true to the best of my knowledge. I understand if I give false information or do not report all the information needed, I may be subject to prosecution for fraud.

Signature	Date and Time
canuat citizen	5/13/2019 1:57:03 PM

**Sign & Pay**

Enter your credit card/debit card information on the **Select Payment Type** screen (there is a fee of \$10 per CAN Check request submitted). Select **Next** to Continue to Payment overview page.

### Select Payment Type



### Card Details

Card Number (required)

Expiration Date (required)

Security Code (required)



01 2019



No spaces or dashes, please.

[Help](#)



### Cardholder Details

Name (required)

Country (required)

United States

Address Line 1 (required)

Address Line 2

City (required)

State (required)

KY

Zip Code (required)

**NEXT**



Select **Pay Now** if all details are correct to finalize payment.

## CHFS Child Abuse & Neglect (CAN) Checks

**Visa Card Details**

Card Number \*\*\*\*\*1111      Expiration Date 1/2020

**Cardholder Details**

Jonathan Vandiver  
Frankfort, KY 40601 United States

**PAY NOW**

**Summary**

CAN Application Fee      \$10.00  
Item Price: \$10.00  
Quantity: 1


---

Sub Total      \$10.00

**Total**      **\$10.00**

[Cancel and return to CHFS Child Abuse & Neglect \(CAN\) Checks](#)    [Login with Kentucky Online Gateway](#)

[Policies](#)   [Security](#)   [Disclaimer](#)   [Accessibility](#)

  
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After successful payment or if you selected to pay by Agency Payment Code a CAN Check request receipt is displayed proving the assigned Case Number(s) for your request(s).

Payment Confirmation

### Thank you for your payment! Your payment is confirmed

Payment Confirmation Details	
Confirmation #	41904152
Payment Type	CreditCard
Total Amount	10.00
Transaction Status	Paid

Your application(s) have been submitted for review. Below are the case numbers for reference

#	Case Number	First Name	Last Name
1	CHRS20190000106	██████████	██████████

A confirmation of payment notification has been sent to your provided E-Mail address.

[Go to Dashboard](#)

An E-Mail will be sent to the address on file providing the Case Number upon successful submission.

The **My Dashboard** section of the of the Requestor dashboard displays In Process, Completed and Cancelled CAN Check requests.

Select **View** to see CAN Check(s) in Submitted or In Process Status.

Select **Result** to see the final results of CAN Check(s) in Completed or Cancelled Status.

Select **Print** to print the CAN Check for your records.

## Requestor Dashboard

Applicant Search

Applicant First Name

Applicant Last Name

Form - Select Form - ▾

Status - Select Status - ▾

Applicant Search

Batch ID	Applicant ID	Case Number	First Name	Last Name	Form	Date Submitted	Date Last Updated	Status	View	Edit	Print
1051	1068	CHRS20190000104	Tyiron	Lannister	DCC	5/6/2019	5/6/2019	Completed	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Result</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Edit</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Print</span>
1052	1069	CHRS20190000105	Jane	Dixon	DCC	5/6/2019	5/6/2019	Completed	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Result</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Edit</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Print</span>
1053	1070		Morpheus	Endless	DCC	5/13/2019	5/13/2019	Saved	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">View</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Edit</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Print</span>
1054	1071	CHRS20190000106	Jonathan	Vandiver	DCC	5/13/2019	5/13/2019	Submitted	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">View</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Edit</span>	<span style="background-color: #0056b3; color: white; padding: 2px 5px;">Print</span>

Showing 21 to 24 of 24 entries Previous 1 2 Next

An E-Mail will be sent to the address on file upon CAN Check request completion or cancellation stating that results are available for review.