OSPRA 104(/)

Authorization to Forward Criminal History Record Information from the City School District of the City of New York to the New York State Education Department Office of School Personnel Review and Accountability

NYS Education Department

S K: (518) 473-2998

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, Q V W U X F W L R Q V W R \$SSOLFDQW: Please complete Sections 1, 2 and 3 and 6 X E RhLSActhoenf4rm t K U R X

Please Note This form is to be filed by individuals who have been previously fingerprinted (after July 1, 1990) for a license and/or employment by the New York City Board of Education (NYCBOE) and are authorizing the NYCBOE to forward their criminal history to the New York State Education Department for certification application and/or employment purposes.

(Inaccurate or in	SECTION 1 complete information will delaprod	essing)	
Name: (Last)	(First)	(Middle)	* H Q G(NH/FU: ;)
Home Address: (Street, Apt. #)	S	Social Security Number	
City, State, Zip:	Teleph	one (Area Code and	Number)
E-mail Address:	Date	of Birth (Month, Day,	Year)
	SECTION 2		

Please choose9) one of the following:

I am leaving or have left the employ of the NYCBOE and am seeking clearance for certification and/or employment.

I am remaining in the employ of the NYCB@Ed I am seeking clearance for certification.

I am remaining in the employ of the NYCBOE and I am is the man in the man in a covered school other than the NYCBOE.

SECTION 3

- x I hereby authorize the NYCBOE to forward the content of my criminal histography as secured from DCJS and the FBI to the New York State Education Department as a condition of my applification and/or clearance for employment. I further understand that the NYCBOE is authorized to forward subsequent criminal history notifications received from DCJS to the New Y8tate Education Department.
- x I understand that if my fingerprints have **better** retaine **b**y DCJS, I will have to be fingerprinted again to meet the requirements of thapter 180 of the Laws 2000.
- x I understand that if I am seeking clearance for employment D FRYHUHG VFKRRO D UHTXHV PXVW EH VXEPLWbW/mh/GprobsQect/fv/e%enthologyer before a clearance will be issued.

Signature:	Date

SECTION 4

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