



AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT (Revised 10/13/2011)

Social Security Number _____ Driver's License # and Issuing State _____ Citizenship (Country) _____
Print Full Name _____ Other names used _____ Race _____ M F
(Including Maiden Name) _____ *Sex
(Hair Color) _____ (Eye Color) _____ Height _____ Weight _____ Date of Birth (MM/DD/YYYY) _____ Place of Birth _____
Current address _____ (City, State, Zip) _____ (County of Residence) _____

Addresses for the Past Seven Years

Dates Lived Here

City _____ State _____ County _____ Zip Code _____

City _____ State _____ County _____ Zip Code _____

Position Applied For: _____ Permanent _____ Temporary _____ Work Location: _____

Contact Information: Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____ Email: _____

Warning: Failure to report criminal convictions, Probation Before Judgment (PBJ), STET Docket, Nolle Prosequi, not guilty dispositions, or pending charges may result in termination of your employment with Anne Arundel County Public Schools. Any individual who fails to disclose prior conviction or the existence of pending charges shall be guilty of perjury. This is a misdemeanor offense and on conviction is subject to a fine not exceeding \$1,000 or imprisonment not exceeding 1 year or both. **EMPLOYEE INITIAL HERE** _____

Have you ever been convicted of, placed on probation before judgment, found not guilty, have pending criminal charges against you without a final disposition, placed on a STET docket, or given Nolle Prosequi for an offense other than a minor traffic violation?

Yes _____ No _____ If yes, check all that apply:

Conviction: _____ Charge _____ Date _____ Location _____

PBJ: _____ Charge _____ Date _____ Location _____

Pending Charges: _____ Charge _____ Date _____ Location _____

Nolle Prosequi: _____ Charge _____ Date _____ Location _____

Not Guilty: _____ Charge _____ Date _____ Location _____

STET: _____ Charge _____ Date _____ Location _____

Have you ever been identified as responsible for "Indicated" child abuse/neglect by any Department of Social Services **Yes**____ **No**____

EMPLOYEE SIGNATURE _____ **Date:** _____

Maryland Code : FAMILY LAW : [TITLE 5. CHILDREN](#) ; [SUBTITLE 5. CHILD CARE; FOSTER CARE](#) ; [PART VI. CRIMINAL BACKGROUND INVESTIGATIONS FOR EMPLOYEES OF FACILITIES AND OTHER INDIVIDUALS THAT CARE FOR OR SUPERVISE CHILDREN](#) ; § 5-563. Prior criminal offenses: As part of the application process for a criminal history records check, the employee, shall complete and sign a sworn statement or affirmation disclosing the existence of a criminal conviction, probation before judgment disposition, not criminally responsible disposition or pending criminal charges without a final disposition.

Screening: _____ Cleared _____ Pending Issue _____ *For Investigations Office Staff Use Only* _____ Not Cleared

Signature of Screening Official

Date.