



*Department of Human Resources*

*Providing Quality Customer Service for Our Employees and Potential Employees*

**RELEASE OF EMPLOYMENT INFORMATION FORM**

The Superintendent authorizes Virginia Beach City Public Schools staff to release information concerning current and former employees' employment. With regard to requests for employment verification, the current or former employee may authorize release in **one** of the following methods:

- Release of employment dates (hire and/or termination), current or last position, fulltime/part-time/ substitute/ temporary, salary and supplements.

**OR**

- Release of the entire employment file. (Requestor will be responsible for the cost of copying this file. *Requests to copy portions of the file will be honored for current VBCPS employees only*).

At its sole discretion, VBCPS may choose to release other information with regard to a request for employment verification.

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 I have read the conditions set forth above and hereby give my permission without limitation for the School Board to provide such information to the requestor and hereby release the School Board and its officers and employees from any liability arising from the release or use of such information from my employment files.

\_\_\_\_\_  
 Current or former employee's signature Date

\_\_\_\_\_  
 Print current or former employee's name SSN #  
*Please include any previous name(s) that you used when employed with VBCPS.*

**Please release my employment information to the following person/organization:**  
 Person or Organization: \_\_\_\_\_

*This Release is effective for the following duration:*  
 Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

HR Use Only
Date received by HR: _____
Response Provided by: _____
HR Staff Member's Signature: _____
Date response provided: _____