



CONTRACTOR RELEASE & AUTHORIZATION FORM

Name: _____
Last First Middle

Home/Cell Phone: _____ Date of Birth: _____

Email Address: _____ Company/ Agency Name: _____

- Yes No Are you a current or former **employee** of the Salem-Keizer Public Schools?
- Yes No Have you ever been approved as a **volunteer** for Salem-Keizer Public Schools?
- Yes No Do you currently hold a license through the Oregon Teacher Standards and Practices Commission (TSPC) or have you held a TSPC licensed in the past?

List Other Names Previously Used: _____
Includes Maiden Name

Driver Lic. / ID Card No.: _____ State: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

AUTHORIZATION TO RELEASE INFORMATION *(Release From Liability & Waiver)*

Backgrounds will be verified. Falsifying or not disclosing information may result in disqualification of your application or termination of your contractual assignment. As part of my application to work for a contractor within Salem-Keizer School District, I hereby consent to and authorize the release of any and all information to Salem-Keizer School District, which may be considered in evaluating my qualifications for working within the district. I therefore release all parties and persons connected with any request for information from all claims, liability and/or damages for whatever reasons arising out of furnishing such information.

To any law enforcement agencies, civil records authorities, and Salem-Keizer Public School District: I authorize you to release to the Salem-Keizer School District any and all information and civil or criminal records naming me, including all entries where I am named as being arrested, as a suspect, as being cited for any crime, violation, infraction or offense, or as otherwise involved or named in any report by any member agency of your organization.

I authorize the Salem-Keizer School District to obtain information from a Credit Reporting Agency. Information obtained may include criminal records and/or verification of information I provided in the application. Credit information will not be obtained. I may request a copy of this record should my contractor application be denied.

I authorize Salem-Keizer School District to release information regarding my criminal history and/or qualifications for working within the district to my employer.

I release the school district and all persons providing this information to the school district from any liability whatsoever for obtaining and providing that information, regardless of the results.

Signature

Date

PLEASE ANSWER THE FOLLOWING QUESTIONS

- Yes No Have you EVER been the subject of a substantiated report of **child abuse or sexual conduct** involving a K-12 student or minor child? If yes, please explain:

Yes No Have you EVER had a report of **abuse, neglect, or sexual misconduct** of any person (adult or child) filed against you? If yes, please explain:

Yes No Have you EVER been reprimanded, disciplined or placed on probation by a **licensing agency** (including but not limited to the Oregon Teacher Standards and Practices Commission) or had a professional license revoked, suspended, or denied? If yes, please explain:

Yes No Have you EVER had a **stalking or restraining order** placed against you? If yes, please provide the following:

Date(s) of Order	County and State	Name(s) of Protected Parties	Explanation of Circumstances

Yes No Have you EVER been **trespassed** from any school, business, or any other property or event? If yes, please provide the following:

Date(s) of Order	County and State	Explanation of Circumstances

Yes No Have you EVER been convicted, pled guilty or pled nolo contendere (no contest) to any **felony or misdemeanor** in any municipal, justice, state, or federal court? If yes, please provide the following:

Names of Offense(s)	Charge/Conviction Date	County & State Where Occurred	Incarceration Date	Probation Date

Yes No Have you EVER been convicted, pled guilty or pled nolo contendere (no contest) to any **violation** in any municipal, justice, state or federal court? If yes, please provide the following:

Names of Offense(s)	Charge/Conviction Date	County & State Where Occurred	Incarceration Date	Probation Date

Yes No Have you EVER received **diversion or a deferred sentence** for any felony, misdemeanor, or violation in any municipal, justice, state or federal court? If yes, please provide the following:

Names of Offense(s)	Charge/Conviction Date	County & State Where Occurred	Diversion Date

Yes No Have you EVER had criminal charges dismissed due to a **civil compromise**? If yes, please provide the following:

Names of Offense(s)	Date of Charge	County & State Where Occurred

Yes No Have you EVER been **arrested or cited** for any offense (felony, misdemeanor or violation) which is still pending in court? If yes, please provide the following:

Names of Offense(s)	Charge/Conviction Date	County & State Where Occurred

Is there any other information you would like us to know?