AUTHORITY FOR RELEASE OF INFORMATION

I authorize The Chapman Corporation and the NC Department of Justice through the State Bureau of Investigation (SBI)/Federal Bureau of Investigation (FBI) and Pamlico County Schools to perform a criminal history record check in connection with my application for employment, continued employment, volunteer service, or other service relationship with **Pamlico County Schools** pursuant to N.C.G.S. 114-19.2, N.C.G.S. 115C-332, applicable Board policies, and administrative procedures.

Last Name First Middle Maiden

(Print or Type)

Previous Name(s):
(Alias Name(s), Former Married Name(s), or Other Name(s) Used)

Social Security Number Date of Birth Sex Race

Current Address:

Previous Addresses: (Last 10 years)

I understand that The Chapman Corporation and its employees, as well as the Pamlico County Board of Education, shall not be held legally accountable in any way for providing this information to Pamlico County Schools, and hereby release said agencies and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the school system may use the results of this criminal history record check in accordance with applicable law and Board policy.

I certify that the information provided on this form is true, complete, and accurate to the best of my knowledge.

Applicant's/Employee's Signature _____

Date _____