

EMPLOYMENT HISTORY REVIEW FORM

CHILD SEXUAL ABUSE AND SEXUAL MISCONDUCT

Pursuant to Section 6-113.2 of the Education Article, Annotated Code of Maryland

TO:								
Name of Current or Former Employer:		Contact Person:			Title:			
Street Address:		City:		State:	Zip Code:			
Telephone Number:	lephone Number: Fax Number:		E-Mail Address:					
The Applicant named below is under comust be obtained from current/forme employment with your entity. Please to the prospective employer indicated you will need to provide additional info Applicant's Name (First, Middle, Last): Any former names:	er emplo provide t at the bo ormation	yers to ensure th he information re ottom of the secon as requested by c	e safety of our student equested on this form w nd page of this form. If y pur entity.	s. The Applican thin 20 calendar	nt has reported previo r days as required by la			
TO BE COMPLETED BY CURRENT OR FORMER EMPLOYER:								
Dates of Employment of Applicant: Positions Held by Applicant:			to					
To the best of your knowledge, has the Been the subject of a child sexual abust the investigation resulted in a finding allegations lacked sufficient evidence a Been the subject of a child sexual abus (unless the investigation resulted in a policies of the employer)? Been the subject of a child sexual abust the investigation resulted in a finding f policies of the school system or nonput Been the subject of a child sexual abust the investigation was closed without of Been the subject of a child sexual abust (unless the investigation resulted in a finding f policies of the school system or nonput Been the subject of a child sexual abust (unless the investigation resulted in a f out by the agency)? Been disciplined, discharged, nonrene separated from any employment whil were under investigation, or due to an Had a license, professional license, or sexual abuse or sexual misconduct we child abuse or sexual misconduct we	e or sexua g by the s according se or sex a finding se or sexua that the a blic scho e or sexua harges on e or sexua inding th wed, or a e allegati a adjudica certificat	al misconduct inveschool system, the school system, the g to the policies of ual misconduct invest that the allegation ual misconduct invest ol employer)? al misconduct invest r resulted in a find al misconduct invest stres of child sexua- tion or findings of ion suspended, sur-	stigation by any school sy e board of education, or the employer)? vestigation by any non-so ns lacked sufficient evic restigation by any state li sufficient evidence accor stigation by any law enfor ing that the allegations v stigation by any child pro were ruled out or the alle om employment, or resig al abuse or sexual misco child sexual abuse or mi rrendered, or revoked w	an arbitrator th chool system em lence according censing agency (ding to state law rcement agency (vere unfounded)) tective services a gations were scr and from or othe nduct were pend sconduct? hile allegations o	at the YES NO ployer YES NO to the YES NO unless YES NO or the YES NO unless YES NO orgency YES NO rewise YES NO ling or YES NO			
child abuse or sexual misconduct? I decline to answer because: it is again	ainst the	laws of my state;	I am restricted by a co	ontract entered i	nto before June 30, 201			
Name of Employer Representative		,, L	Title		· · · · · , · ·			

Signature of Employer Representative Date

Phone Number

E-Mail Address

Under Maryland law, a person acting in good faith may not be held liable for disclosing any information or records related to child sexual abuse or sexual misconduct about a current or former employee's professional conduct or reason for termination of employment in accordance with the law unless the person acted with actual malice toward the employee or former employee or intentionally or recklessly disclosed false information about the employee or former employee. This immunity from liability shall be in addition to and not a limitation of any other immunity provided by law or any absolute or conditional privilege applicable to the disclosure of information or records or the Applicant's consent to the disclosure. Willful failure to respond to or provide the information requested on this form may result in civil penalties or professional discipline.

Applicant certification to be completed by the Applicant for the current employer, each former school employer, and each former employer where the Applicant was employed in a position involving direct contact with minors in the past 10 years, as defined by Maryland law:

Applicant's Name (First, Middle, Last):	If no current or former applicable employment, check here
Applicant's Name (113t, Midule, Last).	
Any former names by which the Applicant has been identified:	
Any former names by when the Applicant has been dentified.	
Date of Birth:	Last 4 Digits of Applicant's Social Security Number:
	Last + Digits of Applicant's Social Security Namber.
Approximate dates of employment with the entity listed above:	
Position(s) held with the entity:	

TO BE COMPLETED BY THE APPLICANT:

Have you ever

Been the subject of a child sexual abuse or sexual misconduct investigation by any school system employer (unless the investigation resulted in a finding by the school system, the board of education, or an arbitrator that the allegations lacked sufficient evidence according to the policies of the employer)? YES NO Been the subject of a child sexual abuse or sexual misconduct investigation by any non-school system employer (unless the investigation resulted in a finding that the allegations lacked sufficient evidence according to the policies of the employer)? YES NO Been the subject of a child sexual abuse or sexual misconduct investigation by any state licensing agency (unless the investigation resulted in a finding that the allegations lacked sufficient evidence according to state law or the policies of the school system or nonpublic school employer)? YES NO Been the subject of a child sexual abuse or sexual misconduct investigation by any state licensing agency (unless the investigation resulted in a finding that the allegations lacked sufficient evidence according to state law or the policies of the school system or nonpublic school employer)? YES NO Been the subject of a child sexual abuse or sexual misconduct investigation by any law enforcement agency (unless the investigation resulted in a finding that the allegations were ruled out or the allegations were screened out by the agency)? YES NO Been the subject of a child sexual abuse or asked to resign from employment, or resigned from or otherwise separated from any employment while allegations of child sexual abuse or sexual misconduct investigation by any child protective services agency were under investigation, or due to an adjudication or findings of child sexual abuse or miscon		
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By signing this form, I understand that if I provide false information or willfully fail to disclose material information required by this form I will be subject to professional discipline up to and including termination and denial of employment, and any other criminal or civil penalties in accordance with state law and regulations. I hereby authorize the employer named on this form to release the requested information, and any other information permitted by law, to the entity listed below and: (1) if the entity listed below is a Maryland county board or nonpublic school, to any other Maryland county board or nonpublic school; or (2) if the entity listed below is a contracting agency, to other contracting agencies. I release, waive and discharge the employer identified on this form, the entity named below, and any additional entity with which this information is legally shared from any and all liability of any kind that may arise from the disclosure and use of the information provided on this form.

Signature of Applicant		Date		
Please return this form to:				
School Entity/Contracting Agency:		Contact Person:	Title:	
Street Address:		City, State, Zip Code:		
Phone Number:	Fax Number:	F-Mail	Address:	

[EMPLOYER USE ONLY] -- Date Form Received: ______

Received by: _____