Grant ESD Disclosure Release

(District Submits This Form to Previous Employers that are Education Providers)

0:	
Education Provider	
Personnel Department	
Street Address	
City, State, Zip	

The applicant named below is under consideration for employment in our district. This individual has previously been employed with your organization. As a former employer, we request you provide the information requested on this form within 20 business days pursuant to ORS 339.374.

Applicant Name (First, Middle, Last)	
Dates of Employment	□ No Record of Employment
Positions Held	

I authorize you to release to the district listed below, all information related to any substantiated reports of child abuse, sexual conduct or crimes listed in ORS 342.143. I release the above employer and employees acting on behalf of the employer from any liability for providing information described in this document.

Applicant Signature

This	soction	to ha	compla	tod by	previous	amplay	n only
1 1115	section	to be	comple	eled by	previous	employe	n omy.

The employee \Box was \Box was not the subject of a substantiated report of child abuse or sexual conduct related to the applicant's employment with the education provider.

- Dates of any substantiated reports: _
- Please attach the definitions of child abuse and sexual conduct used by the District when the education provider determined that any reports were substantiated and the standards used by the District to determine whether any reports were substantiated.
- If the employee was convicted of a crime listed in ORS 342.143, please send the employee's disciplinary records as required by ORS 339.388 (7).

Former Employer Representative Signature

Date

Date

Printed Name

Job Title

Return completed information to:

Grant ESD 835A S. Canyon Blvd., John Day OR 97845