



REGIONAL OFFICE OF EDUCATION **LASALLE, MARSHALL & PUTNAM**

Christopher B. Dvorak - Regional Superintendent
Matthew Winchester - Asst. Regional Superintendent

119 West Madison Street, Room 102 • Ottawa, IL 61350
Telephone (815) 434-0780 • Fax (815) 434-2453

CRIMINAL HISTORY RECORDS CHECK RELEASE

PART I - TO BE COMPLETED BY SUBSTITUTE TEACHER

Date: _____

I, _____, give my permission for the Regional
(Substitute Teacher Print Name)
Office of Education #35 to release the results of my fingerprint background check (both State
Police and FBI reports) to _____.
(Name of District)

Substitute Signature

XXX-XX-_____
Social Security Number

PART II – TO BE COMPLETED BY EMPLOYER/DISTRICT

Principal or Superintendent Name (please print)

Principal or Superintendent Signature (required)

Please indicate below the fax number you would like the results sent to:

School Administrative Fax Number

Please fax this request to 815-434-2453. If you do not receive results within 2 business days please give our office a call.