



Oregon City School District

Oregon City School District Disclosure Release

Learning to be our best.

To:

Education Provider
Attn: 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	<input type="checkbox"/> No Record of Employment
Positions Held	

I authorize you to release to Oregon City School District, all information related to any substantiated reports of child abuse, sexual conduct or crimes listed in ORS 342.143, and/or any ongoing investigation related to a report of suspected child abuse or sexual conduct. This information includes copies of disciplinary records regarding a person convicted of a crime 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

Date

This section to be completed by previous employer only.

The employee was 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.

The employee is is not the subject of an ongoing investigation related to a report of suspected child abuse or sexual conduct. While employed in this district, the employee was was not convicted of a crime listed in ORS 342.143.

- " Dates of conviction: _____
- " Enclose copies of the discipline records.

Former Employer Representative Signature

Date

Printed Name

Job Title

Return completed information to:

Oregon City School District #62
P.O. Box 2110
Oregon City, OR 97045
Attn: Human Resources (503) 785-8427 Fax: (503) 657-2492