## **Ore City Independent School District**

### **Personnel Information/Criminal History Release**

This form will be removed from the application and filed separately in the Personnel Office. Please complete all blanks.

		Last	First	Mido	dle Maiden
Social Security #	Name				
Address	C	ity 			Zip Code 
Home Phone #	Work Phon	e #	S	Sex N	Male Female 
Ethnicity American Ind (Check One)	ian Asian		panic His	spanic	White, Non-Hispanic
	Driver's License #		DL State		DL Exp. Date
(Check One)					
Employee/Applicant	Substitute Personne	el Studer	nt Teacher	Voluntee	r (for class credit)
Parent Volunteer	Business Partnership V	olunteer	Individual Volu	nteer	Other
School where volunteering					
Highest Degree Held		Major		M	inor
Teacher Certified Yes	No State_			-	

# **DPS Computerized Criminal History (CCH) Verification**

(AGENCY COPY)

I,, acknown	, acknowledge that a Computerized Criminal				
APPLICANT or EMPLOYEE NAME (Please print)					
listory (CCH) check will be performed by accessing the Texas Department of Public Safety Secure					
Website and will be based on $\underline{\text{name and DOB}}$ identifiers I	supply. (This is not a consent form.) Aut	hority			
for this agency to access an individual's criminal history	data may be found in Texas Government	Code			
411; Subchapter F.					
Name-based information is not an exact search a	and only fingerprint record searches rep	resent			
true identification to criminal history, therefore the organi	zation conducting the criminal history ch	neck is			
not allowed to discuss with me any criminal history recor	d information obtained using this method	d. The			
agency may request that I have a fingerprint search perf	ormed to clear any misidentification bas	sed on			
the result of the <u>name and DOB</u> search. Once this p	process is completed the information of	on my			
fingerprint criminal history record may be discussed with	me.				
In order to complete the process I must make a	n appointment with the Fingerprint App	olicant			
Services of Texas (FAST) as instructed online at www	w.txdps.state.tx.us /Crime Records/Revi	iew of			
Personal Criminal History or by calling the DPS Program	n Vendor at 1-888-467-2080, submit a fu	ıll and			
complete set of fingerprints, request a copy be sent to the	agency listed below, and pay a fee of \$24	1.95 to			
the fingerprinting services company.					
(This copy must remain on file by your agen	cy. Required for future DPS Aud	its)			
Signature of Applicant or Employee	Please:				
	Check and Initial each Applicable Space				
Date	CCH Report Printed:				
	YES NO	initial			
Agency Name (Please print)					
	Purpose of CCH:				
Agency Representative Name (Please print)	Empl Vol/Contractor	initial			
	Date Printed:	initial			
Signature of Agency Representative	Destroyed Date:	initial			
	Retain in your files				
Date					

#### Pre-Employment Affidavit for Applicant

For purposes of this affidavit:

**Adjudication** and **conviction** refer to a conviction, plea of guilty or no contest (nolo contendre), probation, suspension, or deferred adjudication.

**Charge** refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.

**Inappropriate relationship** refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Educator Certification.

#### I declare the following:

- o I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.
- o I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **false**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:
- I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be <u>true</u>. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:

.....

#### **Declaration of Applicant**

The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit, in accordance with Texas Civil Practices and Remedies Code section 132.001. An applicant who is offered employment will be asked to complete a notarized affidavit attesting to the same.

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I declare under penalty	of perjury that the foregoi	ng is true and correct.			
Name (First, Middle, Last)		<del></del>	Date of Birth		
Address (Street, City, Sta	te, Zip Code)		County		
Executed in	County. State of Te	xas, on the day o	f		
Count		Date	 Month	, Year	



Approved by the Texas Commissioner of Education, October 2017.

<sup>\*</sup>This form will be removed from the application and filed separately in the HR office.