

**Malheur ESD Region 14
Disclosure Release**

(District submits this form to previous employers that are education providers)

To:

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:	<input type="checkbox"/> 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

Date

<p>This section to be completed by previous employer only.</p> <p>The employee <input type="checkbox"/> was <input type="checkbox"/> was not the subject of a substantiated report of child abuse or sexual conduct related to the applicant's employment with the education provider.</p> <ul style="list-style-type: none"> ▪ 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. 	
_____ Former Employer Representative Signature	_____ Date
_____ Printed Name	_____ Date

Return completed information to:

Malheur ESD Region 14
Attention: Personnel Dept
363 A Street West
Vale, OR 97918