

Albany Unified School District
904 Talbot Ave.
Albany, CA 94706

Read Carefully Before Signing

I HEREBY CERTIFY UNDER PENALTY OF PERJURY that all statements made hereon are true and correct and authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application

My signature below authorizes the Albany Unified School District to conduct a background investigation and authorizes release of information in connection with my application for employment. Further, I hold harmless any individual or agency for any information that it may provide in this investigation which may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release Albany Unified School District and the reference source, including previous employers from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: law enforcement agencies and information for any locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Signature of Applicant

Date

Please list current and previous employers, last three only:

Name of Agency	Contact Person	Contact Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____