



OSPRA 104 (08/21)

Authorization to Forward Criminal History Record Information from the City School District of the City of New York to the New York State Education Department

Type or Print All Information & email to NYC in Section 4.

Office of School Personnel Review and Accountability

NYS Education Department

ph: (518) 473-2998

<http://www.nysed.gov/educator-integrity>

****Email this completed form to New York City DOE Division of Human Capital at email address in SECTION 4 below.****

Instructions to Applicant: Please complete Sections 1, 2 and 3 and email the form to NYCDOE email address in Section 4 below.

Please Note: This form is to be filed by individuals who have been previously fingerprinted (after July 1, 1990) for a license and/or employment by the New York City Board of Education (NYCBOE) and are authorizing the NYCBOE to forward their criminal history to the New York State Education Department for certification application and/or employment purposes.

SECTION 1

(Inaccurate or incomplete information will delay processing.)

Name: (Last)	(First)	(Middle)	Sex: (M/F)
Home Address: (Street, Apt. #)		Social Security Number	
City, State, Zip:		Telephone (Area Code and Number)	
E-mail Address:		Date of Birth (Month, Day, Year)	

SECTION 2

Please choose (✓) one of the following:

- I am leaving or have left the employ of the NYCBOE and am seeking clearance for certification and/or employment.
- I am remaining in the employ of the NYCBOE and I am seeking clearance for certification.
- I am remaining in the employ of the NYCBOE and I am seeking additional employment in a covered school other than the NYCBOE.

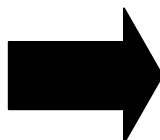
SECTION 3

- I hereby authorize the NYCBOE to forward the content of my criminal history record as secured from DCJS and the FBI to the New York State Education Department as a condition of my application for certification and/or clearance for employment. I further understand that the NYCBOE is authorized to forward subsequent criminal history notifications received from DCJS to the New York State Education Department.
- I understand that if my fingerprints have not been retained by DCJS, I will have to be fingerprinted again to meet the requirements of Chapter 180 of the Laws of 2000.
- I understand that if I am seeking clearance for employment in a covered school, a request for clearance must be submitted in TEACH by my prospective employer before a clearance will be issued.

Signature: _____ Date: _____

SECTION 4

EMAIL THIS FORM TO:



NYC DOE Division of Human Capital
HR Connect Fingerprinting Unit
Email: HRCServiceCenter@schools.nyc.gov