NEW JERSEY STATE DEPARTMENT OF EDUCATION
CRIMINAL HISTORY REVIEW UNIT
APPLICANT AUTHORIZATION AND CERTIFICATION

PCN _____

(Type or print in ink)

(1) Last Name _____ (2) First Name _____ (3) Middle Initial ___ (4) Social Security Number ___ ___ ___

(5) Date of Birth ___ ___ Month ___ ___ Day ___ ___ ___ ___ Year (6) Sex (Circle One): M F (7) Race (Circle One): W B I A H
(Over for Instructions)

(8) Street Address _____ (9) City _____ (10) State ___ ___ (11) Zip ___ ___ ___ ___ ___

(12) Job Category (Circle One):

01 Administrator/Supervisor
02 Classroom Teacher
03 Educational Support Services (Certificated)
04 Substitute Teacher
05 Teacher Aide
06 Custodial/Maintenance
07
08 Clerical/Secretarial
09 Food Service
10 Security
11 Other (Specify below) _____

DISTRICT USE ONLY

(13) NAME OF COUNTY LOCATION _____ (14) COUNTY CODE ___ ___ (15) NAME OF EMPLOYING DISTRICT _____ (16) DISTRICT CODE ___ ___ ___ ___ ___

PRIVATE HANDICAPPED/NONPUBLIC EDUCATION AGENCY USE ONLY

(17) NAME OF COUNTY LOCATION _____ (18) COUNTY CODE ___ ___ (19) NAME OF PRIVATE SCHOOL _____ (20) AGENCY CODE ___ ___ ___ ___ (21) SCHOOL CODE ___ ___ ___ ___

I do hereby authorize the New Jersey State Department of Education, its agents and representatives, to submit fingerprint data pertaining to me to the Federal Bureau of Investigation and the New Jersey State Police Bureau of Identification for the purpose of obtaining criminal history record information as required by *N.J.S.A. 18A:6-7.1 et seq. or N.J. S.A. 18A:6-4.13.*

FORM "A" – (NEW EMPLOYEES OR EMPLOYEES WITH OVER 180 DAYS BREAK IN SERVICE)

I, _____ swear/affirm that I have not been convicted nor do I have any charges pending for the following crimes or offenses: any crime of the first or second degree; any crime bearing upon or involving sexual offense or child molestation; an offense involving the possession, manufacture, transportation, sale, distribution, habitual use of a controlled dangerous substance or any violation involving drug paraphernalia, including hypodermic needles; any crime involving the use of force or the threat of force to or upon a person or property including, but not limited to, robbery, aggravated assault, stalking, kidnapping, arson, manslaughter and murder, any crime of possessing weapons; a third degree crime as set forth in Chapter 20 of Title 2C (theft); recklessly endangering another person, terroristic threats, criminal restraint, luring or enticing child into motor vehicle or isolated structure; causing or risking widespread injury or damage; criminal mischief, burglary, usury, threats and other improper influence, perjury and false swearing, resisting arrest, escape; any conspiracy to commit or attempt to commit any of the crimes described in this act.

FORM "B" – (CURRENT EMPLOYEES CHANGING DISTRICTS – BREAK IN SERVICE UNDER 180 DAYS)

I, _____ swear/affirm that I have not been convicted of any crime or offense bearing upon or involving sexual offense or child molestation; endangering the welfare of children or incompetents; an offense involving the manufacture, transportation, sale, possession, habitual use of a controlled dangerous substance; any crime involving the use of force or the threat of force to or upon a person or property including robbery, aggravated assault, kidnapping, arson, manslaughter and murder, or a simple assault involving the use of force

Signature of Applicant Telephone No. Date Notary

Copy Distribution: White-Department of Education Canary-Applicant Pink-Submitting District/Private School Goldenrod-Contracted Service Provider

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