Peru Central School District

RELEASE OF INFORMATION FORM

I hereby authorize and consent to the release of information and records bearing on my personal history, academic record, job performance, and arrests and conviction, if any, to the Superintendent of Schools and the Board of Education of Peru Central School District and employees authorized by them. The information will be used for the purpose of determining my qualifications for employment with Peru Central School District.

Upon request, a photocopy of this signed statement may be furnished to the school, present or former employer, present or former landlord, criminal justice agency, or other person furnishing such information or record.

_____

STATE OF NEW YORK)
)
COUNTY OF CLINTON)

On this _____ day of _____, _____, before me the subscriber _____, personally known to me to be the same person described in and who executed the within instrument, and she/he duly acknowledged to me that she/he executed the same.

_____
Notary Public