CRIMINAL HISTORY DISCLOSURE STATEMENT
AUTHORIZATION AND RELEASE

Student: ___________________________ Major ___________________________

Course: ___________________________ Date: ___________________________

Please read carefully!

As a prerequisite to the placement of education majors in field experiences, the College of Education requires students to complete the following Criminal History Disclosure Statement. Students are also required to update the Information contained in this Disclosure Statement based on any changes in or additions to their criminal history until the time they graduate or otherwise cease their enrollment in the College of Education.

____________________________________________________________________

Have you ever been convicted of, pled guilty or nolo contendere with respect to, or received probation before judgment with respect to a crime against children, in Maryland or any other jurisdiction? As defined in Article § 35C of the Annotated Code of Maryland, a crime against children includes child abuse of a child. You need not provide any information concerning criminal charges against you that have been expunged.

____No  ____Yes

Have you ever been convicted of, pled guilty or nolo contendere with respect to, or received probation before judgment with respect to, a crime of violence? Crimes of violence are defined in Article 27, § 643B or the Annotated Code of Maryland. You need not provide any information concerning criminal charges against you that have been expunged.

____No  ____Yes

If your answer to either of the preceding questions is yes, please explain fully on a separate sheet of paper, specifying the nature and date of the offense(s), the name and location of the court(s) and the disposition(s) or outcome(s), including the sentence(s) imposed, if any, and attach.

I hereby declare and affirm under penalties of perjury that the contents of the foregoing Disclosure Statement are true and correct and complete to the best of my knowledge, information and belief. I understand that I am obligated, and I hereby agree, to update the information contained in the Disclosure Statement based on any changes in or additions to my criminal history until such time that I graduate or otherwise cease my enrollment in the College of Education. I also understand that the failure fully and accurately to complete and update the Disclosure Statement could result in action being taken against me, including removal from a field placement and/or dismissal from the College of Education and/or the University of Maryland.
I hereby authorize the College of Education and/or the University of Maryland and their agents, employees and representatives to investigate, utilize and disseminate the Disclosure Statement, and any information contained therein or derived therefrom, for any and all purposes associated with my field placement and with inquiries regarding my licensure or certification, and my employment, as a certified education professional in the state of Maryland or any other jurisdiction.

I hereby release, discharge and exonerate the College of Education and/or the University of Maryland and their agents, employees, and representatives from any and all liability, loss, claims and/or damages of every nature and kind arising out of, or in any way related to, the Disclosure Statement, the information contained therein or derived therefrom and the investigation, dissemination or use thereof.

Signature of Student                  Signature of Parent or Guardian
(Do not sign until instructed by Notary)   If Student is under 18

Student ID No.: __________________________

Printed Name of Student                  Printed name of Parent

Local Address: __________________________

Local Phone No.: _________________________

(Do not write below this line. To be completed by Notary)

STATE OF _______________________________________________________________________

COUNTYOF _______________________________________________________________________

Subscribed and sworn before me this __________ day of ______________________, 20__

_______________________________________________________________________________

Notary Public