





**District Office**

Thomas A. Edison School  
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Mary Beth Fiore, Superintendent

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**RELEASE OF INFORMATION**

I, \_\_\_\_\_, Residing at \_\_\_\_\_  
First Name MI Last Name Applicant's address  
\_\_\_\_\_  
city, state, zip

**declare, subject to the penalties of perjury**, that the statement made in this application have been examined by me and to the best of my knowledge and belief are true and correct.

I further authorize the release of any and all information about myself from any source deemed necessary, prior to being considered for appointment within the Elmira Heights Central School District. This release includes all or any one of the following: former employers, listed references, Central Registry for Child Abuse and Neglect, Chemung County Department of Social Services, Chemung County Sheriff's Department, local Police Departments, New York State Police and any police agency from areas of former residence.

I further state that to the best of my knowledge:

I **(have) or (have not)** ever been convicted of a crime **(misdemeanor / felony)** in this state or any  
**Circle One** **Circle as applicable**

other jurisdiction.

Only relevant information obtained through this investigation shall be considered for employment purposes.

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Maiden **and** Previous Married Name(s)

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Witness Signature

▶ ▶ **PLEASE HAVE YOUR SIGNATURE WITNESSED BEFORE RETURNING** ◀ ◀

Affidavit

Have you had your fingerprints taken? \_\_\_\_\_.

If "yes" for which school district?  
\_\_\_\_\_

STATE OF NEW YORK  
COUNTY OF CHEMUNG

\_\_\_\_\_, being duly sworn, deposes and says  
Prospective Employee's Name

I am an applicant for a position as \_\_\_\_\_ in the Elmira Heights Central School District. I make the following representations as an inducement to EHCSD to consider and commence my employment.

1. I have been advised, and understand, that New York State Law requires, as part of the application process for the position, that I receive clearance for employment from the New York State Education Department.
2. I have been advised, and understand, that New York Law requires that, as part of the clearance process for employment, and as a condition to my employment by EHCSD, I be fingerprinted for purposes of a criminal history check.
3. I have forwarded my consent form, fingerprint cards, and the requisite fee to the New York State Department of Education as part of the clearance process.
4. Check the boxes that apply to each of the questions below:
  - yes     no      Do you have a pending criminal charge in New York State?
  - yes     no      Do you have a criminal conviction in New York State?
  - yes     no      Do you have a pending criminal charge in a jurisdiction outside of New York State?
  - yes     no      Do you have a criminal conviction outside of New York State?
5. I understate that my completion and submission of this Affidavit is just one part of the employment application process. I further understand that, even if the results of my criminal history check confirm my representations in the Affidavit, EHCSD has no obligation to employ me.
6. I certify that my statements in this Affidavit, to the best of my knowledge and belief, are true and correct, and that any omission and/or misstatement of any material fact(s) may be cause for the EHCSD to refuse to hire me, revoke an offer of conditional employment, and/or terminate me if I have been hired.

\_\_\_\_\_  
Signature of Prospective Employee

\_\_\_\_\_  
Date

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public