



## AFFIRMATION OF EMPLOYMENT HISTORY REVIEW COUNTY BOARDS/NONPUBLIC SCHOOLS

Pursuant to Section 6-113.2 of the Education Article, Annotated Code of Maryland Section § 6-113.2 of the Education Article, Annotated Code of Maryland, requires county boards and nonpublic schools to conduct an employment history review prior to hiring individuals applying to certain positions. As part of this review, a county board or nonpublic school may use the results of previous employment history reviews of an individual conducted by other county boards and nonpublic school employers. The results of the following employment history review have been received:

**Previous Employer County Board or Nonpublic School:** \_\_\_\_\_

**Date of Review:** \_\_\_\_\_

By signing this form, I swear or affirm that:

- I was employed with the employer providing the results of the employment history review listed above;
- I have reviewed the results of the employment history review listed above;
- The employment history review conducted by the previous Maryland county board or nonpublic school as indicated above included all prior employment required to be reported at the time under the law; and
- I have reported to the prospective employer county board or nonpublic school any employment subsequent to the date of the employment history review indicated above or missing from the employment history review indicated above; and
- I understand that if I provide false information or willfully fail to disclose material information required by this form, I will be subject to professional discipline up to and including termination and denial of employment, and any other criminal or civil penalties in accordance with state law and regulations.

\_\_\_\_\_  
Applicant Name (Please Print)

\_\_\_\_\_  
Signature of Applicant Please return this form to:

Please return this form to:

Prospective Employer County Board or Nonpublic School: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

[EMPLOYER USE ONLY]

Date Form Received: \_\_\_\_\_

Received by: \_\_\_\_\_