

**MONTGOMERY COUNTY PUBLIC SCHOOLS  
OFFICE OF HUMAN RESOURCES AND DEVELOPMENT**

**CONTRACTORS AUTHORIZATION TO RELEASE FORM**

I, \_\_\_\_\_, have been assigned to work on a **Montgomery County Public Schools (MCPS)** worksite as an employee or member of the workforce of a business or entity that has a contract with MCPS to provide goods and/or services to the school system. Pursuant to **MCPS** policy and recent amendments to § 5-561 of the Family Law Article of the Maryland Code, I have been fingerprinted as part of a criminal background check for my work on an **MCPS** work site for an **MCPS-approved** contractor.

I hereby authorize **MCPS** to release to my employer reports regarding any and all criminal history records that **MCPS** receives as a result of the criminal background check, but not necessarily limited to, the Federal Bureau of Investigation FBI and State of Maryland criminal records, national and state sex offender registries, certification and licensure records, and child protective services records.

As an **MCPS** contractor, your employer may be required to take appropriate steps to promptly follow up on information identified in the criminal background check.

**\*Alert Notices**

Please note that the Montgomery County Public Schools may receive alert notices when future arrests/court dates/criminal information is posted to the FBI and/or the State of Maryland.

**TO BE COMPLETED BY THE INDIVIDUAL UNDERGOING A BACKGROUND CHECK:**

<b>Name: (Last, First, Middle)</b>	
<b>Alias, Maiden, or Former Names:</b>	
<b>Date of Birth:</b>	
<b>Phone Number:</b>	
<b>Email Address:</b>	

**TO BE COMPLETED BY THE CONTRACTING COMPANY:**

<b>Name of Contractor:</b> <i>(who has been awarded the bid)</i>	
<b>Sub-Contractor:</b> <i>(whom are you working for)</i>	
<b>Name of an Authorized Representative:</b> <i>(from your company)</i>	
<b>Company Address:</b> <i>(if you are a sub-contractor please add your company information)</i>	
<b>City, State, Zip Code:</b>	
<b>Telephone Number:</b>	
<b>Company Representatives Email Address:</b> <i>(for approval/denial letters)</i>	

**TO BE SIGNED BY THE INDIVIDUAL UNDERGOING BACKGROUND CHECK:**

<b>Signature</b>	<b>Date</b>

↓ OFFICE USE ONLY ↓

**CJIS NUMBER:**