



### OSPRA 103 (10/07)

## Authorization to Forward Criminal History Record Information to the City School District of the City of New York

Type or Print All Information

Office of School Personnel Review and Accountability  
NYS Education Department

ph: (518) 473-2998  
[www.highered.nysed.gov/tcert/ospra](http://www.highered.nysed.gov/tcert/ospra)  
[OSPRA@mail.nysed.gov](mailto:OSPRA@mail.nysed.gov)

Instructions to Applicant: Please complete Sections 1 and 2 and mail the form to the New York City Board of Education (NYCBOE) address in Section 4.

Please Note: This form is to be filed by individuals who have submitted, or are in the process of submitting their fingerprints to the New York State Education Department and are seeking employment with the NYCBOE.  
*Inaccurate information will delay processing.*

### SECTION 1

Name: (Last)	(First)	(Middle)	Sex: (M/F)
Home Address: (Street, Apt. #)	Social Security Number:		
City, State, Zip:	Telephone: (Area Code and Number)		
E-mail Address:	Date of Birth: (Month, Day, Year)		

### SECTION 2

I hereby authorize the Commissioner of Education to forward the content of my criminal history record as secured from DCJS and the FBI to the NYCBOE as a condition of my employment application with the NYCBOE. I further understand that the Commissioner of Education is authorized to forward subsequent criminal history notifications received from DCJS to the NYCBOE.

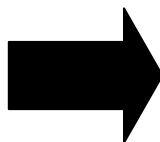
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 3

Signature of NYCBOE Office of Personnel Investigation Representative: \_\_\_\_\_

### SECTION 4

# EMAIL TO:



**Division of Human Resources**  
HR Connect Fingerprinting Unit  
Email: [HRConnect@schools.nyc.gov](mailto:HRConnect@schools.nyc.gov)