

Sexual Misconduct Disclosure Statement

As required by the Louisiana Revised Statute 17:81.9 (Act 723), the applicant authorizes all previous employers to disclose any and all information in the applicant's personnel file related to instances of sexual misconduct with students committed by the applicant. The applicant releases previous and current employers from liability for providing the requested information to New Beginnings Schools Foundation.

- I have read and understand the statement above.
- I also understand that I cannot be considered for employment with New Beginnings Schools Foundation unless this form is signed.
- Once this form is signed, the applicant may be hired on a conditional basis pending the review of any information obtained.
- I agree that a copy of this form will be sent to each of my previous employers.
- Each completed form received will be placed in my personnel file.

Please check the appropriate statement:	
I have formerly worked in (a) scho	ool district(s) in the State of Louisiana.
I have never worked in (a) school	district (s) in the State of Louisiana.
Print Full Name:	Date:
Signature:	Date:
	is to be completed by previous employer.
	ег:
There is no information in	this employee's file indicating sexual misconduct, abuse, or mation available to suggest this employee has been guilty of
I have attached documentate	tion regarding sexual misconduct, abuse, or neglect.
Print Name of Authorized HR Employee: _	Date:
Signature of Authorized Employee:	

Please return to: New Beginnings Schools Foundation, Attn: Human Resources, 2045 Lakeshore Drive CERM Building, Suite 415, New Orleans, LA 70122