

Association of Alaska School Boards

**RELEASE AND CONSENT TO CONDUCT  
BACKGROUND INVESTIGATION**

I, \_\_\_\_\_ (applicant name), have applied for employment for Superintendent positions in Alaska and the Association of Alaska School Boards (AASB) will conduct the searches.

I understand that for AASB to determine my eligibility, qualifications and suitability for employment, AASB will conduct a background investigation to determine if I am to be considered for an offer of employment. This investigation may include asking my current employer, any former employer and any educational institution I have attended about my education, training, experience, qualifications, job performance, professional conduct and evaluations, as well as confirming my dates of employment or enrollment, position(s) held, reason(s) for leaving, whether I would have been rehired, reasons for not rehiring (if applicable) and similar information.

I further understand that a criminal background check must be conducted prior to assuming any position offered to me, and that the results of such a check could have an impact on my employment.

I hereby give my consent for any employer, educational institution, or professional organization of which I am or have been a member, to release any information in connection with this background investigation.

According to the Family Educational Rights and Privacy Act, I understand that I have a right to see most educational records that are maintained by any educational institution.

In light of the preceding paragraph, I hereby waive \_\_\_\_\_ / do not waive \_\_\_\_\_ (initial only one) my right to see any written reference or other information provided to the District by any educational institution.

Whether or not I have waived my right to see or to receive copies of written references furnished to AASB by employers or educational institutions, I release, hold harmless and agree not to sue or file any claim of any kind against any current or former employer or educational institution, and/or any officer or employee of either, that in good faith furnishes written or oral references requested by this District to complete its background investigation.

An emailed ([khultengren@asab.org](mailto:khultengren@asab.org)) or faxed (907-586-2995) copy of this form shows my signature and shall be as valid as an original.

Also, by virtue of this release, I authorize AASB to initiate a background investigation as is should deem necessary for employment consideration.

Applicant Name (printed): \_\_\_\_\_

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

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

