Waiver to Release TB and Criminal Background Records

Teacher education candidates are required by law to show evidence of a negative TB test (28 Pa. Code §23.44), and obtain a Pennsylvania State Criminal History Record (Act 34 of 1985), Federal (FBI) Criminal History Report (Act 114 of 2006), and Child Abuse Report (Act 151) prior to the start of their first school based field experience, and they are expected to maintain up-to-date versions of these records throughout their preparation until such time WCU recommends them to the Pennsylvania Department of Education for teaching certification. A teacher education candidate with a child abuse or criminal record may be prevented from obtaining a certification to teach.

Signing this waiver authorizes the Professional Education Unit at West Chester University to release these medical and criminal background records to PK-12 school entities as part of the process of arranging early field placements or student teaching placements on your behalf.

WAIVER TO RELEASE CRIMINAL BACKGROUND RECORDS

I, ________________________________, hereby authorize the Professional Education Unit of West Chester University to release my TB test and criminal background check records to public school districts, private schools, intermediate units, area vocational-technical schools, or other school entities in which the University will seek field experiences or student teaching experiences on my behalf. I understand that by signing this authorization, I am waiving my rights of nondisclosure of these records, under the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C.A. § 1232g, only for the purpose described above.

I further understand that I do not have to consent to this disclosure and that I may revoke the authorization by submitting a written revocation of this authorization to the University, however revoking my authorization will prevent me from making any further progress in my teacher education program.

____________________  ____________________________________________________
[student’s signature]   [date]