



**New York City Department of Education
Division of Human Resources
Office of Personnel Investigation
65 Court Street – Room 409
Brooklyn, New York 11201**

**Part 1
(Page 1 of 2 Pages)**

REQUEST FOR CONDITIONAL FINGERPRINT CLEARANCE

Instructions: This form is for use in connection with the procurement of pedagogical consultants (Educational, Artistic, Evaluation, Legal and Medical). Part 1 is to be completed and signed by the Consultant Monitoring Unit of the Division of Human Resources. Part 2 (Affidavit) is to be completed in full by the consultant nominee before a notary public.

When completed, this form should be delivered to the attention of the Director, Office of Personnel Investigation at the above address. Any incomplete application will be returned to the applicant.

FOR OFFICE USE ONLY

Certification by the Division of Human Resources

I approve the processing of the within named consultant nominee in the title of:

The Consultant Approval Form (Form DHR/DFO 9950) has been approved by the Consultant Monitoring Unit.

_____ **DHR Approving Officer**

_____ **Date**

STATE OF NEW YORK)
COUNTY OF) SS:

Part 2 - Affidavit
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_____, being duly sworn, deposes and says
(Print Full Name)

1. I now reside at: _____
Street Address

City State Zip Code Telephone No.

2. My Social Security Number is: _____

My Date of Birth is: _____
Month Day Year

3. I have applied for consultant service with the New York City Department of Education and my fingerprints were taken by the Department on: _____
Date

4. I understand that the Department will conduct an investigation to determine whether I have any criminal record and will evaluate that record. I make this affidavit in consideration of my consultant service in the interim between the execution of this affidavit and the completion of the Department's investigation and evaluation.

5. I understand that if I have been convicted of a criminal offense or if any criminal charges are pending against me, my consultant service with the Department may be terminated until the investigation and evaluation have been completed and a determination has been made that my criminal record does not disqualify me from the consultant service I am seeking with the Department of Education.

6. I have not been convicted of any criminal offense.

7. There are no criminal actions pending against me.

8. I answered "NO" to Question 5 in my Consultant Nomination Form (DHR 190) with regards to ever being convicted of a criminal offense.

9. I understand that any omission and/or misstatement of material facts may result in termination of my consultant services and will be incorporated into my record for review in connection with any future application.

KNOWINGLY MAKING AN APPARENTLY SWORN FALSE STATEMENT IS A PUNISHABLE OFFENSE UNDER THE PENAL LAW OF NEW YORK STATE.

Affiant (Sign Name in Full)

Sworn to before me this ____ day of _____ 20____

Signature of Notary Public

FOR OFFICE USE ONLY
Approved: _____
Director, OPI Date
Data Input: _____
Operator Date