



Authorization for Release of Records

Use this form only when requesting records housed and controlled by the Educator Licensing Office. There may be records on file with the Colorado State Archives Office that were transferred from our control to theirs. Most records that were transferred will be more than ten years old. To seek such records, you may request records from the State Archives Office at https://www.Colorado.gov/pacific/archives-search.

Requestor: Complete the top portion of this form and indicate which record(s) you are seeking. Then forward form to the person (applicant/credential holder) in which you are seeking records on. Once this completed form has been returned by the applicant, mail the original to the address shown in the upper right hand corner. Requests that are received via email or fax will be ignored as our office must have the original request before releasing records. Educator/Applicant/Credential Holder: Complete the bottom portion of this form in front of a notary. Return completed and signed form to the requestor. Release may be subject to fees and once this original form has been received, an invoice may be sent to the requestor

To Be Completed by the Requestor

\* Required Field by Requestor

Request is being made on the behalf of a: (Choose only one) School District Private School College/University Self Representing Attorney Other (list): Requestor's Last Name\* Requestor's First Name\* Email Address\* Title\* Contact Phone\* Today's Date\* Name of Requesting Agency\* Signature of Requestor\* Preferred Method of Contact\* Electronically Phone U.S. Mail Mailing Street Address City State Zip

Name of the Person you are Requesting Records on: Last Name\* First Name\* Date of Birth\* Is this Person Currently Employed by your Agency? Specifically check the information or record you are requesting (check any that apply): Copy of an Application Correspondence Notes Enforcement Case Synopsis CBI/FBI Criminal History Synopsis Law Enforcement Records\*\* Criminal Court Records\*\* Past Employment Personnel File\*\* CDE State Board Disciplinary Action CDE State Board Settlement Other not Listed, Specify: Official transcripts may not be released by CDE and must be obtained by the student directly from their college/university. CDE does not provide test score reports; the student must obtain these directly from the test company.

NOTE: Release may be subject to fees. If fees apply, CDE will provide you an invoice with the cost prior to the release. The records in custody of the CDE's Educator Talent Division are considered "Criminal Justice Records," and their release is governed by the Colorado Criminal Justice Act (CJRA), C.R.S. 24-72-301 et seq. Pursuant to the CJRA §24-72-306, reasonable fees, not to exceed actual costs, including but not limited to personnel and equipment, for the search, retrieval and redaction of the records need to be paid before the records are released. Fees are billed at the rate of \$7.50/quarter hour or \$30/hour, with a quarter hour minimum fee per request. An additional fee of \$0.25 per page applies if release is provided in hardcopy format. Once the fee has been received by CDE's Background Unit, the records will be compiled. If the actual time required to prepare the release exceeds the quote shown on the invoice, additional fees may be assessed.

To Be Completed by the Applicant/Credential Holder and Notary Public

\* Required Field by Educator/Applicant/Credential Holder

Last Name\* First Name\* Middle Name\* Date of Birth\* List any Previous Names Used (maiden name, nickname, etc.)\* Contact Daytime Phone\* Cell\* Email Address\* Mailing Street Address\* City\* State\* Zip\* Social Security Number\* I do hereby request and authorize the Colorado Department of Education to release any and all requested records in the possession of CDE to the above requestor. This authorization shall be valid indefinitely. Signature in Front of a Notary\* Date\*

Notary Public

The foregoing instrument was acknowledged before me this: Date My Commission Expires: Date Notary Public Printed Name By Notary Public Signature Seal Witness my hand and official seal.

Important: Mail original to CDE. CDE must have the signed original before the request will be processed. If you email this form, you must follow-up by mailing the original to the address at the top of this form.