



COLLEGE OF  
EDUCATION  
**Certification Office**

## Information and Consent Form

### Release of Education Records and Personal Information

I authorize Seattle University to release orally or in writing, all pertinent education records, personally identifiable information, or other data or information relating to me to **the Office of the Superintendent of Public Instruction** for the purpose of investigating and determining my eligibility for Washington State certification.

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Printed Name	Signature	Date
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I authorize Seattle University to release orally or in writing, all pertinent education records, personally identifiable information, or other data or information related to me to **requesting school districts** for the purpose of field placement and my eligibility for Washington State certification.

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Printed Name	Signature	Date
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### Character & Fitness and Background Clearance

I understand that pursuant to WAC 181-79A-155, all Seattle University candidates for certification must submit an affidavit through the Office of the Superintendent of Public Instruction (OSPI) related to their character and fitness. In addition, I understand that WAC 181-79A-155 also requires Seattle University to submit either an affidavit to OSPI that indicates that faculty members who personally know or knew the candidate were contacted and have no knowledge of any relevant information related to the candidate's character or fitness that would adversely affect the candidate's ability to serve in a certificated role, or a statement of the reasons why it is not possible to make such an affidavit. To this end, I understand that the Dean of the College of Education's designee, the Associate Dean for Academic and Student Services, who also serves as the College's Certification Officer, will contact program faculty members for such information from time to time.

I understand that I must successfully complete a background check prior to starting the College of Education program, which includes providing fingerprint clearance. I must also maintain this clearance through the day on which Seattle University endorses me for certification.

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Printed Name	Signature	Date
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Seattle University  
College Of Education Certification Office  
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