



DISTRICT OF COLUMBIA

OFFICE OF THE STATE SUPERINTENDENT OF

EDUCATION

Traffic Record Check Affirmation Form FY 2021

Directions to complete this form

1. Provide this form to **all** employees. Each employee should initial the affirmation, print name, sign, and date at the bottom of the form.
2. When submitting these affirmations in SARA, organize them in the same order as staff is listed on the Staffing Pattern Form.



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TRAFFIC RECORD CHECK AFFIRMATION FORM

The Office of the State Superintendent (OSSE) is authorized to conduct a traffic record check on all employees of child development facilities who enter into an agreement with OSSE to provide subsidized child care services and will be required to drive a motorized vehicle to transport a child or children in the course of providing child care services.

The applicant must certify that they have conducted a Mandatory Drug and Alcohol Testing for these staff members and employees, and maintain the findings of these tests and present them upon request for inspection by OSSE.

All employees must attest to one of the following:

(Initial next to appropriate response)

_____ **I will not** be required to drive a motorized vehicle to transport a child or children during the course of providing child care services. Therefore, I opt out of the traffic record check.

_____ **I will** be required to drive a motorized vehicle to transport a child or children during the course of providing child care services. I authorize OSSE to conduct a traffic record check. I understand that based on the results of that check, OSSE may re-assess my suitability to provide transportation for children.

I understand that I have the right to obtain a copy of any report from a traffic record check and to challenge the accuracy and completeness of any such report. I also acknowledge that OSSE may decide to deny or terminate its Provider Agreement to provide subsidized child care services based on the results of any traffic record check and that I may appeal that decision to the Commission on Human Rights within 30 days of OSSE's written decision.

Printed Name: _____

Signature: _____ Date: _____