



Dear Employee,

The State of Hawaii, Department of Human Services, Social Services Division requires the employee to complete a Consent to Release Information from the Child Protective Services System Central Registry form, for purposes of making employment decisions to any organization working directly with children.

Please open link and complete this form as follows:

<http://humanservices.hawaii.gov/ssd/files/2014/04/Protective-Service-Central-Registry-Consent-4-14.doc>

- Please PRINT or TYPE, no cursive handwriting
- Use only BLUE or BLACK ink
- PRINT your full name on the space provided to “I hereby give my consent”

- Name of Individual or Organization – **Prince William County Schools**
- Relationship – **Employer**
- Address – **HR, Compliance Specialist, 14715 Bristow Road, Manassas, VA 20112**
- Phone Number – **(703)791-8958/8382**

- List your DOB and SSN
- List any Alias, Former Name and/or Maiden Name(s)
- Read the release statement and sign/date the form

Bring this form, along with all completed documents, to your Employment Processing appointment with PWCS. This form will be submitted to the Department of Human Services, Social Services Division on your behalf.

If you have any questions on this matter, please contact us directly at (703)791-8958/8382.

Sincerely,

Compliance Specialist
Human Resources Department