



Dear Employee,

The state of South Carolina, Department of Social Services, requires the employee to complete the attached Consent to Release Information form for purposes of making employment decisions to any organization working directly with children.

Please open link, print this form and complete as follows:

[dss-form-3072.pdf](#)

- Please PRINT or TYPE, no cursive handwriting
- Use only BLUE or BLACK ink

Section I. Purpose for Request

- Check Box – **Other**
- Please specify - **Employment**

Section II. Mail Results To:

- Please check box – **Schools**

Section III.

- Please complete fully and legibly

Section IV

- Name – **PWCS HR Compliance**
- Address – **14715 Bristow Rd.**
- City/State/Zip – **Manassas, VA 20112**
- Attn: **Human Resources/Compliance**
- Tel. No. – **703-791 8382/8598**
- Email: **HRCCompliance@pwcs.edu**

Bring this form and all completed documents to your Employment Processing appointment with PWCS. **You will sign and date this form at your appointment.** This form will be submitted to the South Carolina Department of Social Services on your behalf.

If you have any questions on this matter, please contact the Compliance Office directly at 703-791-8958/8382.

Sincerely,
Compliance Specialist
Human Resources Department