

NAME OF ACADEMY \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**UNPROFESSIONAL CONDUCT DISCLOSURE**  
**REQUEST/REPLY FORM**

DATE \_\_\_\_\_

FORMER EMPLOYER \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

To: \_\_\_\_\_

RE: NAME OF APPLICANT: \_\_\_\_\_  
SOC. SEC. #: \_\_\_\_\_  
APPROXIMATE DATES: \_\_\_\_\_  
OF EMPLOYMENT

Pursuant to Section 1230b(2) of the Michigan School Code, MCL 380.1230b(2), we are requesting information from you regarding any unprofessional conduct by the above individual and copies of all documents in his/her personnel record relating to that unprofessional conduct.

Unprofessional conduct is defined by the Michigan School Code, MCL 380.1230b (8) as:

- One or more acts of misconduct.
- One or more acts of immorality, moral turpitude or inappropriate behavior involving a minor.
- Commission of a crime involving a minor.

**Section 1230b (3) of the Michigan School Code, MCL 380.1230b (3) requires you to provide the information requested and copies of all documents in the above named individual's personnel record relating to unprofessional conduct not later than twenty (20) business days after receiving this request. In accordance with Public Act 189, please find attached the individual's Authorization, Release, and Waiver form.**

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**Please complete the following:**

**YES:** There has been unprofessional conduct. (Please enclose copies of any related personnel record or document.)  
**NO:** There has been no unprofessional conduct.

Name of Person Completing this Form (Please Print): \_\_\_\_\_  
Position/Title: \_\_\_\_\_ Signature Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Please return all information to:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

If you have questions please contact me at: \_\_\_\_\_

Sincerely,

\_\_\_\_\_  
\_\_\_\_\_  
(Academy Representative)  
(Title)