



Private Scholarship School Certification of Final Determination of Eligibility for the Disqualification List

Personal information of the individual to be included on the Disqualification List

Fields marked with * are required

* First Name:	PATRICIA	* Date of Birth (DOB):	11/08/1980	
Middle Name:	SALLY	* Social Security Number (SSN):	1234	Last 4 Digits
* Last Name:	SI			

Verification of information of the individual to be included on the Disqualification List

In order to report a person for the Disqualification List, the following must be true, as reflected by checking the boxes below.

*

☒

I verify that a final report contains a determination that the person is ineligible for employment* with the school

*

☒

I verify that this determination is based upon a finding, supported by clear and convincing evidence or material*, that the person committed either sexual misconduct with a student* or that the person has been convicted* of one of the crimes listed in s. 1012.315, F.S.

*

☒

I verify that the sexual misconduct or crime occurred on or after June 1, 2022, while the person was employed* by the school in a covered position.*

*

☒

I confirm that the person has been provided written notice of the consequences of placement on the Disqualification List, as set forth in the capitalized language found in Rule 6A-10.084(3)(b)3., F.A.C.

*

☒

I verify that the final report relied upon to report the person to the Disqualification List was issued in conformance with procedures adopted by the school or its governing authority to comply with Rule 6A-10.084(6), F.A.C.

*Please see Rule 6A-10.084, F.A.C., for a definition of the term.

Underlying conduct information of the individual to be included on the Disqualification List

*

Please select at least one option from below:

☐ Sexual misconduct with a student as defined by this rule, occurring on or after June 1, 2022.

☒ Misconduct identified in s. 1012.315, F.S., occurring on or after June 1, 2022.

Select a value

Adjudicated guilty by a court
Found guilty of, has pled guilty or pled nolo

*

Section:

☒ Felony Offense

☒ Misdemeanor Offense

☐ Any criminal act committed in

☒ Any delinquent act committed ...

* Felony Offense

☒ Section 393.135, relating ...
☒ Section 394.4593, relating to ...

* Misdemeanor Offense

☒ Section 784.03, relating to battery...
☒ Section 787.025, relating to luring...

Date of Underlying Conduct:

MM/DD/YYYY

Final Report Number: *

3265864

Final Report Date: *

MM/DD/YYYY

Employment information of the individual to be included on the Disqualification List

* Position Type:

☒ Instructional Personnel ☐ Adminstrative Personnel ☐ Educational Support Personnel

* Last Date of Employment:

11/08/2021

Separation Type

Resigned in Lieu of Termination

Termination

Other

Employment site information of the individual to be included on the Disqualification List

* Entity Name:

School Number/Name:

Select School Information

0001 | School Name Sample (1)

0002 | School Name Sample (2)

Comments: