

SUPERINTENDENT SEARCH DETAILS

SEARCH TIMELINE

- Application Deadline: April 24, 2026
- Interviews: Completed in Early May
- Position begins July 1, 2026

REQUIRED CANDIDATE CRITERIA

- Maryland Superintendent Certification
- Doctorate, either in Education or Public Administration
- Minimum experience as a Maryland public school classroom teacher: 5 years.
- Minimum experience as a Maryland public school principal: 5 years.
- Knowledge of the Maryland education system, laws, funding, curriculum, assessment, and the Blueprint for Maryland's Future.
- **Three-year prior residency requirement removed.**

IDEAL CHARACTERISTICS

The Ideal Candidate will possess the following characteristics:

- **Leadership & Experience:** Proven ability to lead a diverse public school system, with over 20 years of continuous experience preferably with Harford County Public Schools, including in-classroom teacher, principal, and central office administration.
- **Community & Family Relationship Builder:** A candidate who builds consensus and fosters a culture of mutual trust, and respect among staff, students, parents, and community members.
- **Strong Moral Compass:** An ethical and transparent leader who holds high standards of integrity, honesty, compassion, courage, and flexibility, and expects those traits in staff and students.
- **Student-Centric Focus:** Committed to engaging students and developing programs that directly support student achievement and well-being.
- **Support for HCPS Employees:** Dedicated to creating a positive culture and addressing the needs of employees, improving teacher retention, and enhancing staff diversity and professional growth.
- **Administrative Competence:** Strong skills in managing complex programs, including: fiscal accountability policy development, school safety, and facility management.

APPLICATION FOR SUPERINTENDENT OF SCHOOLS

PERSONAL INFORMATION

Full name: _____ Phone: _____

Home Address: _____

Email: _____

EDUCATION

Institution | Graduation Date | Degree

CURRENT/MOST RECENT EMPLOYMENT

Title: _____ Start and end dates: _____

Employer: _____ Phone: _____

Address: _____

Reason for leaving position: _____

Immediate supervisor: _____ Phone: _____

MARYLAND SUPERINTENDENT CERTIFICATION

Do you currently hold a Maryland Superintendent's Certificate? Yes No *If no, have you applied?* Yes No

BACKGROUND INFORMATION

Have you ever been involuntarily terminated? Yes No *If yes, please attach an explanatory statement.*

Anything in your background that could affect performance? Yes No *If yes, please attach an explanatory statement.*

REFERENCES

- 1) Name: _____ Role/Relationship: _____
Email: _____ Phone: _____
- 2) Name: _____ Role/Relationship: _____
Email: _____ Phone: _____
- 3) Name: _____ Role/Relationship: _____
Email: _____ Phone: _____

ADDITIONAL

- 1) The successful candidate will be required to file a financial disclosure statement.
- 2) Please submit a personal resume including all experience.

APPLICANT CERTIFICATIONS

I certify that all statements made on this application are true, accurate, and complete. As part of this application process, I authorize the district or its agents to conduct work history, reference checks and criminal background checks and to contact the Maryland State Department of Education and receive information regarding my certification status.

Signature: _____ Date: _____

RETURN APPLICATION TO:

Kelly L. Griffith, Ed.D., Lead Consultant
MABE Superintendent Search Service
621 Ridgely Avenue, Suite 300
Annapolis, MD 21401
410-841-5414; 800-841-8197
Kgriffith@mabe.org; <https://www.mabe.org/>

The Board of Education of Harford County does not discriminate on the basis of sex and prohibits sex discrimination in any education program or activity that it operates, as required by Title IX and its regulations, including in admission and employment. HCPS' Non-discrimination policy can be located at [NON-DISCRIMINATION POLICY](#) on the HCPS website under Board of Education Policies and Procedures.

**HARFORD COUNTY BOARD OF EDUCATION
ETHICS POLICY
FINANCIAL DISCLOSURE FORM A**

This form is to be used by members of the Harford County Board of Education ("HCBOE").¹

Instructions:

1. Fill in the preliminary information requested in the box below. Be sure to correctly identify the reporting period.
2. Upon completion of your financial disclosure statement, sign and date the lower portion of the page and make the required oath or affirmation before a notary public or other officer authorized to take oaths.

Regular Reporting Period: January 1 through December 31, **2025**

Or

Date of Appointment through December 31, 2025

PLEASE PRINT OR TYPE

FIRST NAME	INITIAL	LAST NAME
CURRENT POSITION OR OFFICE HELD WITH HCBOE OR HCPS, IF ANY <i>(OR OFFICE FOR CANDIDACY)</i>		
E-MAIL ADDRESS		

This financial disclosure statement describes all interests and related transactions and matters required to be disclosed by Harford County Board of Education Ethics Policy, Policy Number 12-0001-000 with respect to the period indicated and pertaining to the person filing the statement. The statement consists of this cover sheet, the checklist, and Schedules A through I.

I hereby make oath or affirm under the penalties of perjury that the contents of this financial disclosure statement, including the Schedules attached hereto, are complete, true and correct to the best of my knowledge, information and belief.

(SEAL)

Signature of Person Filing: _____

Date: _____

Sworn before me on this ____ day of: _____

Signature of Notary Public: _____

Printed/Typed Name of Notary Public: _____

My Commission Expires: _____

This Financial Disclosure Form is subject to public review and inspection. Please sign below if you wish to be notified in the event a request for such a review and inspection is made relative to your financial disclosure.

Please notify me when a request is made to review and inspect my Financial Disclosure Form.

Name

Date

¹ Also referred to herein as Harford County Public Schools (HCPS).

Instructions:

Check the proper block to Questions A through I. Please do not leave any questions unanswered. If you check "Yes" to any question be sure to complete the corresponding Schedule. If you check "No" to any question, be certain to check "No" at the corresponding Schedule as well.

	YES	NO
A. I, my spouse or a dependent child held interests during the reporting period in real property located in or outside Maryland. (If "Yes," complete Schedule A.)		
B. I, my spouse or a dependent child held interests during the reporting period in corporations, partnerships and similar entities. (If "Yes," complete Schedule B.)		
C. I, my spouse or a dependent child held interests during the reporting period in a non-corporate business entity, other than a partnership, which did business or sought to do business with HCPS. (If "Yes", complete Schedule C.)		
D. I, my spouse or a dependent child received gifts during the reporting period from persons or entities which did business or who sought to do business with HCPS, or who were registered or required to register as lobbyists. (If "Yes," complete Schedule D.)		
E. I, my spouse or a dependent child was a partner or held an office, directorship, or salaried employment during the reporting period in an entity or with a person which did business or which sought to do business with HCPS. (If "Yes," complete Schedule E.)		
F. I, my spouse or a dependent child owed debts (excluding retail credit accounts) during reporting period to persons or entities which did business or which sought to do business with HCPS. (If "Yes," complete Schedule F.)		
G. My spouse or dependent child was employed by HCPS during the reporting period. (If "Yes," complete Schedule G.)		
H. I, my spouse or a dependent child received earned income from an entity other than HCPS, or was a sole or partial owner of a business entity from which earned income was received, during the reporting period. (If "Yes," complete Schedule H.)		
I. Is additional information set forth on Schedule I? (If "Yes," complete Schedule I.)		

Form 1

Schedule A – Real Property Interests

Do you, your spouse or a dependent child have any interest (**as an owner or a tenant**, including interests in time shares) in real property in Maryland or in any other state or country?

Yes
 No (Go to Schedule B)

If Yes: (Answer each question below. A separate Schedule A will be required for each property you need to disclose.)

1. What is the address or legal description of the property? (Give Street Address, if you know it. If the property is your primary residence, you may enter the lot and block legal description instead, if you wish)

Street Address _____

City/State/Zip _____

2. What kind of property is it?

Improved (indicate whether property is residential or commercial property): _____

Unimproved (vacant lot): _____

3. Is the interest held directly by you, your spouse or a dependent child?

Direct _____ Spouse _____ Dependent Child _____

4. Are you the owner or tenant?

Owner _____ Tenant _____

5. Do you hold the interest solely or is it jointly held with another?

Solely _____ Jointly _____ Tenants by the Entirety _____

If held jointly, or by tenants by the entirety, the name(s) of the other joint owner(s): _____

6. Are there any legal conditions or encumbrances on the property? (Example: mortgages, liens, contracts, options, etc.)

Yes
 No

If yes, what is/are the name(s) of the lender(s), creditor(s), lien holder(s), etc? _____

7. What date was the property acquired? _____

8. How was the property acquired? (Example: purchase, gift, inheritance, etc.)

9. From whom was the property acquired? (Name of individual or entity from whom you purchased or inherited the property or who gifted the property to you.)

10. What consideration was given when the property was acquired? (Dollar amount paid or, if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property)

-Select One-

- Below \$25,000
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$124,999
- \$125,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 to \$249,999
- \$250,000 to \$299,999
- \$300,000 to \$349,999
- \$350,000 to \$399,999
- \$400,000 to \$449,999
- \$450,000 to \$499,999
- \$500,000 to \$749,000
- \$750,000 to \$999,999
- \$1,000,000 and Over
- N/A

11. Was any interest in this property transferred during the reporting period?

___ Yes

___ No

If Yes;

11.A. What percentage of interest was transferred:

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%
- 75-99%
- 100%
- N/A

11.B. What consideration was received for the interest:

-Select One-

- Below \$25,000
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$124,999
- \$125,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 to \$249,999
- \$250,000 to \$299,999
- \$300,000 to \$349,999
- \$350,000 to \$399,999
- \$400,000 to \$449,999
- \$450,000 to \$499,999

- \$500,000 to \$749,000
- \$750,000 to \$999,999
- \$1,000,000 and Over
- N/A

11.C. To whom was the interest transferred: _____

If you have any additional interests in real property in Maryland, any other state or any other country, please use additional sheet(s), if necessary, and respond to each above question for each such entry.

Schedule B – Interests in Corporations and Partnerships

Did you, your spouse or a dependent child have any interest in any corporations, partnerships, limited liability partnerships (LLP) or limited liability companies (LLC) during the reporting period whether or not the entity did business with HCPS? You need not disclose holdings in an IRS-qualified trust or college savings plan, including 403(b) plans, the State of Maryland § 401(a), § 401(k) and § 457 (deferred compensation) plans, and Maryland College Savings Plans, such as 529 investment accounts.

Yes
 No (Go to Schedule C)

If Yes: (Answer each question below. A separate Schedule B will be required for each interest you need to disclose.)

1. What is the name of the entity? Include the complete name of the entity, do not identify solely by trading symbol: _____

2. Does the stock of the corporation trade on a stock exchange? Yes No

If "no," the legal address of the entity's principal office.

3. Is the interest held directly by you, your spouse or a dependent child?

Directly: _____ Spouse: _____ Dependent Child: _____

4. Do you hold the interest in your name alone, or is it held jointly?

In your name alone: _____ Jointly: _____

If jointly, the percentage of your interest:

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%
- 75-99%
- 100%
- N/A

5. What number of shares do you, your spouse or a dependent child own? (Example: stock, notes, bonds, puts, calls, straddles, purchase options, etc.) If in a non-publicly traded entity or LLP or LLC, report the percentage of ownership.

Name and number of stock, notes, bonds, puts, calls, straddles, purchase options, etc.:

-Select One-	-Select One-	-Select One-
<input type="checkbox"/> Under 100	<input type="checkbox"/> Under 100	<input type="checkbox"/> Under 100
<input type="checkbox"/> 100 to 249	<input type="checkbox"/> 100 to 249	<input type="checkbox"/> 100 to 249
<input type="checkbox"/> 250 to 499	<input type="checkbox"/> 250 to 499	<input type="checkbox"/> 250 to 499
<input type="checkbox"/> 500 to 749	<input type="checkbox"/> 500 to 749	<input type="checkbox"/> 500 to 749
<input type="checkbox"/> 750 to 999	<input type="checkbox"/> 750 to 999	<input type="checkbox"/> 750 to 999
<input type="checkbox"/> 1,000 and over	<input type="checkbox"/> 1,000 and over	<input type="checkbox"/> 1,000 and over
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
Percentage of Ownership: ____%	Percentage of Ownership: ____%	Percentage of Ownership: ____%

6. Are there any legal conditions or encumbrances that apply to the interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

___ No

___ Yes; **If yes**, name of entity holding the encumbrance: _____

7. Did you, your spouse or a dependent child acquire an interest in the entity during the reporting period?

___ Yes

___ No

If Yes;

7A. In what month was the interest acquired? _____

7B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.): _____

7C. From whom was the interest in the entity acquired? (If you purchased it from a brokerage, the name of the brokerage): _____

7D. What number of shares was acquired?

Name and number of stock, notes, bonds, puts, calls, straddles, purchase options, etc:

_____ <p>-Select One-</p> <p><input type="checkbox"/> Under 100</p> <p><input type="checkbox"/> 100 to 249</p> <p><input type="checkbox"/> 250 to 499</p> <p><input type="checkbox"/> 500 to 749</p> <p><input type="checkbox"/> 750 to 999</p> <p><input type="checkbox"/> 1,000 and over</p> <p><input type="checkbox"/> N/A</p> <p>Percentage of Ownership: ____%</p>	_____ <p>-Select One-</p> <p><input type="checkbox"/> Under 100</p> <p><input type="checkbox"/> 100 to 249</p> <p><input type="checkbox"/> 250 to 499</p> <p><input type="checkbox"/> 500 to 749</p> <p><input type="checkbox"/> 750 to 999</p> <p><input type="checkbox"/> 1,000 and over</p> <p><input type="checkbox"/> N/A</p> <p>Percentage of Ownership: ____%</p>	_____ <p>-Select One-</p> <p><input type="checkbox"/> Under 100</p> <p><input type="checkbox"/> 100 to 249</p> <p><input type="checkbox"/> 250 to 499</p> <p><input type="checkbox"/> 500 to 749</p> <p><input type="checkbox"/> 750 to 999</p> <p><input type="checkbox"/> 1,000 and over</p> <p><input type="checkbox"/> N/A</p> <p>Percentage of Ownership: ____%</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

8. Was any interest in this entity transferred during the reporting period?

Yes
 No

If Yes;

8A. What amount of the interest was transferred?

(continued on next page)

-Select One-

- Under 100
- 100 to 249
- 250 to 499
- 500 to 749
- 750 to 999
- 1,000 and over
- N/A

Percentage of
Ownership: ____%

-Select One-

- Under 100
- 100 to 249
- 250 to 499
- 500 to 749
- 750 to 999
- 1,000 and over
- N/A

Percentage of
Ownership: ____%

-Select One-

- Under 100
- 100 to 249
- 250 to 499
- 500 to 749
- 750 to 999
- 1,000 and over
- N/A

Percentage of
Ownership: ____%

8B. What consideration was received for the interest in the entity? (Dollar amount paid, or if you received the property as a gift or inherited it, the fair market value and terms at the time you transferred your interest in the property):

-Select One-

- Under \$1,000
- \$1,000 to \$4,999
- \$5,000 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

OR

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%
- 75-99%
- 100%
- N/A

8C. To whom was the interest in the entity transferred? _____

If you have additional interests in corporations or partnerships, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.

Schedule C – Interests in Non-Corporate Business Entities Doing Business with the HCPS

Do you, your spouse or a dependent child have an interest in any non-corporate business entity (a sole proprietorship) that did business with or sought to do business with HCPS during the reporting period?

- Yes
- No (Go to Schedule D)

If Yes; (Answer each question below. A separate Schedule C will be required for each business entity to be disclosed.)

1. Name and Address of the principal office of the business entity?

Name: _____

Address: _____

City/State/Zip: _____

2. Is the interest held directly by you, your spouse or a dependent child?

Direct: _____ Spouse: _____ Dependent Child: _____

3. Do you hold the interest solely or is it jointly held with another?

Solely: _____ Jointly: _____

3.A. If jointly, the percentage of the joint interest:

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%
- 75-99%
- 100%
- N/A

3.B. Dollar value of the interest in the entity:

-Select One-

- Under \$1,000
- \$1,000 to \$4,999
- \$5,000 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

or percentage of the interest in the entity:

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%
- 75-99%
- 100%
- N/A

4. Are there any legal conditions or encumbrances that apply to the interest in the entity?
(Example: mortgages, liens, contracts, options, etc.)

___ Yes, If yes give name of creditor: _____
___ No

5. Was any interest acquired during the reporting year?

___ Yes
___ No

If Yes;

5A. What month was the interest acquired? _____

5B. How was the interest in the entity acquired? (Example: purchase, gift, will, etc.)

5C. From whom was the interest acquired? _____

5D. What consideration was given when the interest was acquired? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value at the time you acquired your interest in the property)

-Select One-

- Under \$1,000
- \$1,000 to \$4,999
- \$5,000 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

6. Was any of the interest transferred during the reporting period?

___ Yes

___ No

If yes;

6A. What percentage of interest, if less than all, was transferred?

-Select One-

- Under 3%
- 3-9%
- 10-24%
- 25-49%
- 50-74%

- 75-99%
- 100%
- N/A

6B. What consideration was received for the interest in the entity? (Dollar amount paid or if you received the property as a gift or inherited it, the fair market value and terms at the time the interest in the property was transferred):

-Select One-

- Under \$1,000
- \$1,000 to \$4,999
- \$5,000 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

6C. To whom was the interest in the entity transferred? _____

If you have additional interests in sole proprietorship(s) that did business with HCPS during the reporting year, please use additional sheet(s) if necessary, and answer each of the above questions for each additional entry.

Schedule D – Gifts

Under Board Policy No. 12-0001-000, a gift means the transfer of any service or thing of economic value regardless of form without adequate and lawful consideration.

The following items are not deemed to be gifts for reporting purposes unless the gift would tend to impair your impartiality and independence of judgment, or is of significant value that would give the appearance of impairing your impartiality and independent judgment, or is of significant value that you believe or have reason to believe is designed to impair your impartiality and independent judgment:

- 1) A political campaign contribution regulated under Elections Article, Annotated Code Maryland.
- 2) Meals and beverages consumed in the presence of the donor or sponsoring entity;
- 3) Ceremonial gifts or awards that have insignificant monetary value;
- 4) Trivial items of informational value;
- 5) Reasonable expenses for your food, travel, lodging, and scheduled entertainment at a meeting which is given in return for the participation in a panel or speaking engagement at the meeting;
- 6) Gifts of tickets or free admission extended to members of the Board of Education to attend a charitable, cultural, or political event, if the purpose of the gift or admission is a courtesy or ceremony extended to the Board of Education;
- 7) A specific gift or class of gifts which the Ethics Panel exempts upon a finding, in writing, that acceptance of the gift or class of gifts would not be detrimental to the impartial conduct of the business of the school system or Board of Education and that the gift is purely personal and private in nature;
- 8) Gifts from a person related by blood or marriage, or any other individual who is a member of your household; or
- 9) An honorarium for speaking to or participating in a meeting, provided that the offering of the honorarium is in no way related to your school system or Board position.

During the reporting period, I, my spouse or a dependent child received the following gifts (with the retail value at time of receipt noted) from a person or entity that did business with or sought to do business with HCPS.

Not applicable.

Donor

Retail Value

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please use additional sheet(s), if necessary, for any additional entries.

Schedule E – Officers, Directorships, Salaried Employment and Similar Interests

During the reporting period, did you, your spouse or a dependent child have any salaried employment or hold any office or directorship with a person or entity that did business with or sought to do business with HCPS?

- Yes
- No (Go to Schedule F)

If Yes; (Answer each question below. A separate Schedule E will be required for each disclosure.)

1. What is the name and address of the business entity?

Name: _____

Address: _____

City/State/Zip: _____

2. Who was the individual who held the position or interest listed above?

Self: _____ Spouse: _____ Dependent child: _____

2A. Name of spouse or dependent child: _____

3. What is the title of the office you, your spouse or dependent child held? (Example: limited partner, director, treasurer, chair of the board of trustees, etc.) _____

4. What year did the position begin? _____

5. With what HCPS department(s) did the business entity or person do business or seek to do business?

6. What was the nature of the business? (Example: regulated by HCPS, registered under the lobbying law, or involved with sales and contracts with HCPS)

If necessary, please use additional sheet(s) for any additional entries.

Schedule F – Debts You Owe

During the reporting period, did you, your spouse or a dependent child owe a debt (excluding a retail credit account) to a financial entity that did business with or sought to do business with HCPS? **[NOTE: If, on Schedule A, B or C you listed a financial entity that did business with HCPS as the holder of your mortgage or other encumbrance, you must complete Schedule F with regard to that indebtedness.]**

- Yes
 No (Go to Schedule G)

If Yes; (Answer each question below. A separate Schedule F will be required for each debt to be disclosed.)

1. To whom was the debt owed? (Do not include consumer credit debts)

2. When was the debt incurred? _____

3. What are the interest rate and terms of payment of the debt?

Interest Rate:

-Select One-

- Under 5%
- 5-7 1/2%
- Up to 10%
- More than 10%
- N/A

Terms (monthly, bimonthly, annually, etc): _____

4. What was the amount of the debt as of the end of the reporting period. If debt existed during the reporting period but was paid in full at the end of the period, put \$0.

-Select One-

- \$0
- Less than \$1,000
- \$1,000 to \$9,999
- \$10,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999

- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

5. Did the principal of the debt increase _____ or decrease _____ during the reporting period, and by how much?

-Select One-

- \$0
- Less than \$1,000
- \$1,000 to \$9,999
- \$10,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 and Over
- N/A

6. Was any security given for the debt?

___ Yes
___ No

If Yes; Please state what type of security was given (home, car, boat, etc):

If necessary, please use additional sheet(s) for any additional entries.

Schedule G – Family Members Employed by HCPS

During the reporting period, were your spouse or a dependent child employed by HCPS in any capacity?

Yes

No (Go to Schedule H)

If Yes; (Answer each question below. A separate Schedule G will be required for each member of the immediate family who is employed by the State.)

1. Please identify the person so employed and their relationship to you.

2. What was the title of such person's position with HCPS during the reporting period?

If necessary, please use additional sheet(s) for any additional entries.

Schedule H – Employment/Business Ownership

During the reporting period, did you, your spouse or a dependent child receive any earned income from an entity other than HCPS? Please note that your dependent child's employment or business ownership does not need to be disclosed if HCPS does not regulate, exercise authority over or contract with the place of employment for the relevant time period.

Yes

No (Go to Schedule I)

If Yes: (Answer each question below. A separate Schedule H will be required for each member of the immediate family who had employment or ownership of a business entity.)

1. If, during the reporting period, you, your spouse or a dependent child had employment from which you or they earned income, please provide the information below.

Name: _____

Relationship: _____

Name of Employer: _____

Address: _____

City/State/Zip: _____

2. If, during the reporting period, you, your spouse or a dependent child wholly or partially owned any business entity from which income was earned, please provide the information below.

Name: _____

Relationship: _____

Name of Business Entity: _____

Address: _____

City/State/Zip: _____

If necessary, please use additional sheet(s) for any additional entries.

Schedule I – Other

Is there any additional information or interest you would like to disclose?

Please return on or before May 1, 2026
to: Harford County Board of Education
Ethics Panel
c/o Office of General Counsel
102 S. Hickory Avenue
Bel Air, Maryland 21014
410-638-4005
Taylor.Welling@hcps.org
Administrative Support Coordinator