



**APPLICANT BACKGROUND CHECK FORM
("Form A-1")**

Directions: Each local or regional board of education, governing council of a state or local charter school, and inter district magnet school operator is required by Connecticut law to obtain the information requested in this form from any applicant who applies for a position of employment with such local or regional board of education, council, or operator, if the position for which the applicant is applying would cause the applicant to have direct student contact. No local or regional board of education, council, or operator may employ an applicant for a position involving direct student contact who does not provide the information requested in this form. Accordingly, please complete this form and return it to the Human Resources department promptly so that your application may be processed.

Section A -- Current and Former Employers

Directions: Each local or regional board of education, governing council of a state or local charter school, and inter district magnet school operator is required by Connecticut law to conduct a review of your employment history with each of your current or former employers if: (a) such current or former employer was a local or regional board of education, governing council of a state or local charter school, or inter district magnet school operator, or (b) such employment otherwise caused you to have contact with children. Such review must be conducted using the State of Connecticut Educational Employer Verification Form, attached to this form.

Accordingly, please complete the table below (using an additional sheet of paper as needed), and then sign at the bottom of this section. For each employer listed in the table below, please complete Section 1 and the first row of Section 3 ("Name of Employer") of the State of Connecticut Educational Employer Verification Form, using a separate form for each employer. Please return the completed State of Connecticut Educational Employer Verification Forms to the Human Resources department promptly so that your application may be processed.

<u>Employer Name</u>	<u>Employer Address and Email</u>	<u>Employer Telephone #</u>

By signing below, I am affirming that the information provided above is true and correct. I understand that if I knowingly provide false information or knowingly fail to disclose the information requested herein, I shall be subject to discipline by the [BOARD/COUNCIL/OPERATOR] that may include (1) denial of employment or, for certified employees, (2) termination of my employment contract, in accordance with the provisions of Connecticut General Statutes Section 10-151.

Employee Printed Name: _____

Employee Signature: _____

Date: _____

Section B

Directions: Please review the information in this Section B, and then indicate your agreement with the information by signing below.

1. I hereby consent to and authorize disclosure of the following information, and release of related records, by the employers listed in Section A of this form (together the “Employers” and individually an “Employer”):
 - a. The dates of my employment with the Employer.
 - b. A statement as to whether the Employer has knowledge that I:
 - i. was the subject of an allegation of abuse or neglect or sexual misconduct for which there is an investigation pending with any employer, state agency, or municipal police department, or which has been substantiated;
 - ii. was disciplined or asked to resign from employment, or resigned from or otherwise separated from any employment, while an allegation of abuse or neglect or sexual misconduct was pending or under investigation, or due to a substantiation of abuse or neglect or sexual misconduct; or
 - iii. have ever had a professional or occupational license, certificate, authorization, or permit suspended or revoked, or have ever surrendered such a license, certificate, authorization, or permit, while an allegation of abuse or neglect or sexual misconduct was pending or under investigation, or due to a substantiation of abuse or neglect or sexual misconduct.
 - c. More information concerning any response made by any Employer to the request for information and records described in parts (a) and (b) of this Section B.1 of this form.
2. I hereby consent to and authorize disclosure of the following information, and release of related records, by the Department of Education (the “Department”):
 - a. Information concerning my eligibility status for employment.
 - b. A statement as to whether the Department has knowledge that a finding has been substantiated by the Department of Children and Families pursuant to Conn. Gen. Stat. § 17a-101g of abuse or neglect or of sexual misconduct against me, and any information concerning such a finding.
 - c. A statement as to whether the Department has received notification that I have been convicted of a crime or of criminal charges pending against me, and any information concerning such charges.
3. I hereby release the Employers and the Department from liability that may arise from the disclosure or release of records which I have authorized and to which I have consented in Sections B.1 and B.2 of this form.

Employee Printed Name: _____

Employee Signature: _____

Date: _____

Section C

Directions: Please answer the questions below in their entirety, and then sign below. For purposes of these questions, the following definitions apply:

- “Sexual misconduct” means any verbal, nonverbal, written, or electronic communication, or any other act directed toward or with a student that is designed to establish a sexual relationship with the student, including a sexual invitation, dating, or soliciting a date, engaging in sexual dialog, making sexually suggestive comments, self-disclosure, or physical exposure of a sexual or erotic nature, and any other sexual, indecent, or erotic contact with a student.
- “Abuse or neglect” means abuse or neglect as described in Conn. Gen. Stat. § 46b-120, and includes any violation of Conn. Gen. Stat. § 53a-70 (sexual assault in the first degree), § 53a-70a (aggravated sexual assault in the first degree), § 53a-71 (sexual assault in the second degree), § 53a-72a (sexual assault in the third degree), § 53a-72b (sexual assault in the third degree with a firearm), or § 53a-73a (sexual assault in the fourth degree).

Y N Have you ever been the subject of an abuse or neglect or sexual misconduct investigation by any
 employer, state agency, or municipal police department (answer “no” if the investigation resulted in a finding that all allegations were unsubstantiated)?

Y N Have you ever been disciplined or asked to resign from employment or resigned from or otherwise
 separated from any employment while an allegation of abuse or neglect was pending or under investigation by the Department of Children and Families (“DCF”), or an allegation of sexual misconduct was pending or under investigation or due to an allegation substantiated pursuant to Conn. Gen. Stat. § 17a-101g of abuse or neglect, or of sexual misconduct or a conviction for abuse or neglect or sexual misconduct?

Y N Have you ever had a professional or occupational license or certificate suspended or revoked, or have you
 ever surrendered such a license or certificate while an allegation of abuse or neglect was pending or under investigation by DCF or an investigation of sexual misconduct was pending or under investigation, or due to an allegation substantiated by DCF of abuse or neglect or of sexual misconduct, or a conviction for abuse or neglect or sexual misconduct?

Y N Have you ever been convicted of a crime (answer “no” if you have been the subject of any arrest, criminal
 charge, or conviction, the records of which have been erased)?

Y N
 Are criminal charges pending against you?

Y N Are you disqualified from employment with [NAME OF BOARD/COUNCIL/OPERATOR]?

By signing below, I am affirming that the information provided above is true and correct. I understand that if I knowingly provide false information or knowingly fail to disclose the information requested herein, I shall be subject to discipline by the [BOARD/COUNCIL/OPERATOR] that may include (1) denial of employment or, for certified employees, (2) termination of my employment contract, in accordance with the provisions of Connecticut General Statutes Section 10-151.

Employee Printed Name: _____

Employee Signature: _____

Date: _____