

FOR POSITIONS ASSOCIATED WITH CHILDREN (i.e. Children’s Academy, Birth to Three, Public School and Maintenance):

Have you ever been the subject of a Department of Children (DCF) investigation? YES NO N/A

Was this allegation substantiated by DCF? YES NO

(Explain YES answer):

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE MOST RECENT)

May we contact your present and/or past employer? Yes No

* DATE * MONTH & YEAR	NAME, ADDRESS & PHONE NO. OF EMPLOYER	POSITION TITLE	REASON FOR LEAVING
From			
To			
From			
To			
From			
To			
From			
To			

PROFESSIONAL REFERENCES: GIVE THE NAMES OF THREE PROFESSIONAL REFERENCES WHO YOU KNOW AND COULD PROVIDE INFORMATION ABOUT YOUR WORK. TWO REFERENCES MUST HAVE SUPERVISED YOUR WORK.

NAME (First, Last)	COMPANY NAME	EMAIL & PHONE #	RELATIONSHIP TO APPLICANT
1.			
2.			
3.			

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer’s service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and education institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interviews. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer’s president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. ***All applicants who accept employment are required to submit to a pre-employment Background Check and Drug Screen.**

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____ / _____ / _____



DISCLOSURE REGARDING CONSUMER AND/OR INVESTIGATIVE REPORT

To meet the objective of providing a safe, productive work environment, Easter Seal Rehabilitation Center of Greater Waterbury, Inc. (Easterseals) has adopted a policy that requires all applicants who are offered employment and volunteers over the age of minority, to submit to a criminal history conviction background investigation. A “consumer report” and/or an “investigative consumer report” may include information about your character, general reputation, personal characteristics, and mode of living. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records (“driving records”), verification of your education or employment history, or other background checks. Further, you understand that information may be requested from various Federal, State, County and other agencies that maintain records concerning your past activities relating to your driving, criminal, civil, education, credit, and other experiences. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable period of time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your employment and/or education history. The scope of this notice and authorization is all-encompassing, however, allowing Easterseals to obtain consumer reports and investigative consumer reports after acceptance of my offer of employment and throughout the course of your employment to the extent permitted by law, unless you otherwise revoke your consent by providing written notification Easterseals. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

The consumer and/or investigative consumer report(s) will be obtained from:

24/7 Background Check LLC, PO Box 741733, Dallas, Texas 75374, Tel: (877) 556-5135 or (214) 206-3565

PLEASE NOTE: (1) The applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to section 46b- J46, 54-760 or 54-142a, (2) criminal records subject to erasure pursuant to section 46b-J46, 54-760 or 54-142a are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon, and (3) any person whose criminal records have been erased pursuant to section 46b-J46, 54-760 or 54-142a shall be deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

I hereby acknowledge reading the foregoing notification and my associated legal rights (as presented to me separately) and hereby authorize the obtaining of any consumer reports or consumer investigative reports by Easterseals at any time after receipt of this authorization and throughout my employment. I also authorize the above agency to generate a LIFETIME criminal background report.

Applicant Signature

Today's Date

Print your Name (Last, First, Middle Initial)

Other Known Names (if Applicable)



ACKNOWLEDGEMENT AND AUTHORIZATION FOR BACKGROUND CHECK

Print Name: _____

Other Known Names: _____

Current Address: _____

City: _____ State: _____ ZIP: _____

I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Requesting Company, **Easterseals**, at any time after acceptance of my offer of employment and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, local, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **24/7 Background Check LLC, PO Box 741733, Dallas, Texas 75374**, another outside organization acting on behalf of the Requesting Company, and/or the Company itself.

I acknowledge receipt of the below documents and certify that I have read and understand both of those documents. (Please initial below):

_____ **DISCLOSURE REGARDING CONSUMER AND/OR INVESTIGATIVE REPORT**
I have received the Disclosure Regarding Consumer and/or Investigative Report

_____ **A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT (FCRA)**
I have read and received the Summary of Your Rights, and if a California resident/applicant A Summary of Your Rights under the Provisions of California Civil Code §1786.22.

I understand such notices, documents, and communications may be provided electronically and will meet the requirements set forth under Federal and/or State law, as permitted by law. I agree that a facsimile ("fax"), electronic or printout of this authorization may be accepted with the same authority as the original.

I understand by signing my name below, I am authorizing the background check as described above:

Applicant Signature

Today's Date

Print your Name (Last, First, Middle Initial)

Other Known Names (if Applicable)



Voluntary Affirmative Action Self-Identification Form

Why are you being asked to complete this form?

Easterseals is an Equal Opportunity Employer. As required by law, we must record certain information to be made part of our Affirmative Action Plan. Applicants for employment are invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam or other minority.

To help us measure how well we are doing, we are asking you to complete this voluntary form. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

NAME (Last, First, Middle Initial):		DATE:	
POSITION APPLYING FOR:		REFERRAL SOURCE (i.e. Indeed, Walk-in):	
GENDER			
<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other <input type="radio"/> I do not wish to self-identify			
SIGNATURE:			

Race/Ethnicity

Ethnicity:

Are you Hispanic or Latino?

- No, I am **not Hispanic or Latino**.
- Yes, I am **Hispanic or Latino**: A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

Race – IMPORTANT - Only complete this section if you checked “No, I am not Hispanic or Latino” in the Ethnicity section above: What is your race? Select **ONE** of the following categorie(s):

- White** – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black or African American** – A person having origins in any of the Black racial groups of Africa.
- American Indian/Alaskan Native** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian**– A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Two or More Races** – All persons who identify with more than one of the above five *rac*es.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

• Blindness	• Autism	• Bipolar disorder	• Post-traumatic stress disorder (PTSD)
• Deafness	• Cerebral palsy	• Major depression	• Obsessive compulsive disorder
• Cancer	• HIV/AIDS	• Multiple sclerosis (MS)	• Impairments requiring the use of a wheelchair
• Diabetes • Epilepsy	• Schizophrenia • Muscular dystrophy	• Missing limbs or partially missing limbs	• Intellectual disability (previously called mental retardation)

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

Reasonable Accommodation Notice
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Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

Veteran Status

Veteran Status*	Definition
___ Vietnam Era Veteran	Veteran of the Vietnam Era: A person who (1) served on active duty in the U.S. military, ground, naval, or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; OR; (2) was discharged or released from active duty in the U.S. military, ground, naval, or air service for a service connected disability if any part of such active duty was performed in (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.
___ Special Disabled Veteran	Special Disabled Veteran: A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veteran's Affairs for a disability- a) rated at 30% or more; b) rated at 10 or 20% in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap; or c) a person who was discharged or released from active duty because of service- connected disability.
___ Other Eligible Veteran	Other Protected Eligible Veteran: Veterans who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge, a service medal, or an expeditionary medal has been authorized. To identify campaigns or expeditions that meet this criteria, you may visit the following website: www.opm.gov/veterans/html/vgmedal12.htm or send an email to othervets@vets100.com to request a copy of the list.
___ Newly Separated Veteran	Newly Separated Veteran: Any veteran who served on active duty in the U.S. military, ground, naval or air service during the past one-year period, beginning on the date of such veteran's discharge or release from active duty.
___ Not Applicable	



CONSENT FOR INFORMATION INQUIRY TO THE CONNECTICUT DEPARTMENT OF DEVELOPMENTAL SERVICES ABUSE AND NEGLECT REGISTRY

In accordance with Section 17a-247a of the CT General Statutes, and the regulations promulgated thereunder, Easter Seal of Greater Waterbury is requesting information on the following individual(s):

Last Name	First Name	Purpose
_____	_____	___Empl/ ___Prot.Svc.
_____	_____	___Empl/ ___Prot.Svc.
_____	_____	___Empl/ ___Prot.Svc.

I hereby consent to this investigation and authorize Easter Seal of Greater Waterbury to produce a report as stated above, from the DDS Abuse & Neglect Registry

Name

Date

APPLICANT TO KEEP THIS DOCUMENT PAGES 1-3

A Summary of Your Rights Under the Fair Credit Reporting Act

Para informacion en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The federal **Fair Credit Reporting Act (FCRA)** promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment — or to take another adverse action against you — must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - **you are on public assistance;**
 - **you are unemployed but expect to apply for employment within 60 days.**
- **In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies.** See www.consumerfinance.gov/learnmore for additional information.
 - **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.**
- **Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.**
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

APPLICANT TO KEEP THIS DOCUMENT PAGES 1-3

A Summary of Your Rights Under the Fair Credit Reporting Act

- You may **limit "prescreened"** offers of credit **and insurance you get based on information in your credit report**. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the **FCRA**, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel** have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the **FCRA**, and many states have their own consumer reporting laws. In some cases, you may have more **rights under state law**. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center — FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>

APPLICANT TO KEEP THIS DOCUMENT PAGES 1-3

A Summary of Your Rights Under the Fair Credit Reporting Act

3. Air Carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, D.C. 20416
5. Creditors Subject to Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8 th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center — FCRA Washington, DC 20580 (877) 382-4357