

SUBSTITUTE PARAPROFESSIONAL APPLICATION

TOLLAND PUBLIC SCHOOLS
51 Tolland Green
Tolland, Connecticut 06084
(860) 870-6850

The Tolland Board of Education will not make employment decisions (including decisions related to hiring, assignment, compensation, promotion, demotion, disciplinary action and termination) on the basis of race, color, religion, age, gender, marital status, sexual orientation, national origin, ancestry, disability (including pregnancy), genetic information, or gender identity or expression, except in the case of a bona fide occupational qualification.

Name: _____

Mailing Address: _____

Email: _____

Phone Number _____

Circle which schools you would like to substitute at:

BGP(Prek-2)

TIS(3-5)

TMS(6-8)

THS(9-12)

Education	Name & Address	Years completed	Degree Earned
High School	_____		
College	_____		
Other Schooling	_____		

Applicant Background check form (Form A-1) **Section A – Current and Former Employers**

Each local or regional board of education, governing council of a state or local charter school, and interdistrict 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 interdistrict 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 ("Form A-2"), which will be provided upon offer of temporary employment. 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, you will be required to complete Section 1 of Form A-2, using a separate Form A-2 for each employer.

<u>Employer Name</u>	<u>Employer Address</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 Tolland Board of Education that may include denial of employment.

Employee Signature: _____ **Date:** _____

Section B

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 Signature: _____

Date: _____

Section C

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 **Tolland Board of Education**

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 Tolland Board of Education that may include denial of employment.

Employee Signature: _____

Date: _____

All successful job applicants must submit to both a DCF central registry check and a state and national fingerprint-based criminal history record check for a noncriminal justice purpose, in this case employment by a Board of Education, within 10 days of an offer of temporary employment. The applicant must arrange to be fingerprinted by the Tolland Police Department or the Police Department/Resident Trooper/State Police Troop for the town in which the successful applicant resides. Failure of the applicant to have his/her fingerprints taken within such ten-day period without good cause, will be grounds for the withdrawal of the offer of employment. A fee is charged by the Treasurer - State Connecticut for both fingerprints and the process of checking those prints. Your fingerprints will be used to check the criminal history records of the FBI. If you have a criminal history record, we will provide you the opportunity to complete or challenge the accuracy of the information provided. We are advising you that the procedures for obtaining a change, correction or updating of your criminal history record are set forth at Title 28, Code of Federal Regulation, Section 16.34. If you have a criminal history record, you will be afforded a reasonable amount of time (90 days) to correct or complete the record before action is taken based on that information. Results of the criminal history record check will be used for authorized purposes and we will not retain or disseminate it in violation of federal statute, regulation or executive order, rule, procedure, or standard established by the National Crime Prevention and Privacy Compact Council. You have the right to receive the results of the criminal history check for review or possible challenge. If you decide to challenge the accuracy or completeness of your FBI criminal history record you should send your challenge to the agency that contributed the questioned information or the FBI at FBI CJIS Division-Summary Request. A copy of the “Noncriminal Justice Applicant’s Privacy Rights” will be provided to a successful candidate to keep upon offer of temporary employment.