

Serving adults with intellectual and developmental disabilities since 1957.

VOLUNTEER APPLICATION

Volunteer Name:			
Received by:			
, <u></u>			
	Date:	 	



ADVOCATING PERSONAL GROWTH AND COMMUNITY INCLUSION FOR ALL WE SERVE



Name:		Date:
Address:		Phone #:
	/ed? : Where? :	
	Work Phone	#:
Reason for volunteering:		
If community service	e, how many hours are needed? :	
By what date are the	e hours to be completed? :	
Areas of interest:		
List previous volunteer ex	xperience (if any):	
Specify days and hours a	available to volunteer:	
Education:		
Person to notify in case	e of emergency:	
Name	Address	Telephone Number
References:		
Name	Address	Telephone Number
Name	Address	Telephone Number
Name	Address	Telephone Number
Signature:		

CANDIDATE INFORMATION SHEET

621 Jerome Avenue Bristol, CT 06010

Last Name			
First Name			
Middle Name			
Other Name/Alias			
Social Security Number*			
Date of Birth*			
Month /	Day	/ Year	
State Driver's License was	issued		
Driver's License Number _			
Phone Number			
Present Address			
City/State/Zip Code			
Previous Address			
City/State/Zip Code			
Email address			



AUTHORIZATION-DDS REGISTRY CHECK

Bristol Adult Resource Center (BARC) is not permitted to employ any individual who is listed on the DDS Abuse and Neglect Registry (Registry) (CGS Sec. 17a-247c). As a result of this statutory mandate, BARC is required to perform a pre-employment or pre-volunteer check of the Registry. Additionally, BARC is required to terminate employment of any employee (or terminate services of any volunteer) who is added to the Registry after hire by BARC.

By signing below, you indicate your understanding of that restriction, and you authorize BARC to perform the required pre-employment/pre-volunteer check of the Registry.

Refusal to sign this authorization with result in withdrawal of an offer of employment or volunteer services with BARC.

int Name (including middle name):
cial Security Number:
gnature:
ite:

Notice for Use of Background Check <u>Authorization</u>

To all employment candidates:

Please be advised we will only perform a background check per your authorization at such time a conditional offer of employment has been extended to you.



NOTICE DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Company Name: **BRISTOL ADULT RESOURCE CENTER**

In connection with your employment, including independent contractor and volunteer assignments, with the Company Name listed (Bristol Adult Resource Center), this notice is intended to inform you that consumer reports (also known as "a background check") may be obtained from you from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics, and mode of living. These reports may include, but are not limited to, information relating to your criminal information or history, driving and/or motor vehicle records, education or employment history, social media, drug/alcohol test results, social security number and address history or other background checks. 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.

The reports) is being prepared by our background screening vendor, SSC, Inc.

Security Services of CT, Inc. (SSC, Inc)

Background Screening & Investigations Department

25 Controls Drive

Shelton, CT 06484

Toll Free: (800)360-3688

(203)925-6186

www.SSCBSI.com

The scope of this notice is not limited to the present and, if you are hired, will continue throughout the course of your employment, independent contractor, or volunteer assignments, and will allow Bristol Adult Resource Center to conduct future screenings for retention, promotion, or reassignment, as permitted by law and unless revoked by you in writing.

NOTICE DISCLOSURE REGARDING "INVESTIGATIVE CONSUMER REPORT" BACKGROUND INVESTIGATION

Company Name: **Bristol Adult Resource Center**

Company Name listed ("Bristol Adult Resource Center"), may request an investigative consumer report about you from a third-party consumer reporting agency, in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable).

An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews). The most common form of an investigative consumer report in connection with your employment is a reference check through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Bristol Adult Resource Center.

These reports will be conducted by:

Security Services of CT, Inc. (SSC, Inc.) Background Screening & Investigations Department

25 Controls Drive

Shelton, CT 6484

Toll Free: 1 (800) 360-3688

(203) 925-6186

www.SSCBSI.com

<u>AUTHORIZATION-BACKGROUND INVESTIGATION</u>

By signing below, you authorize the obtaining of a consumer report or investigative consumer report by Bristol Ault Resource Center and its designated representatives to assist the company in making an employment-related decision involving me.
The scope of this notice and your authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment, and allow the Company to conduct future screenings for retention, promotion, or reassignment, as permitted by law and unless revoked by you in writing.
You have the right, upon written request made within a reasonable time, to request (1) whether an investigative consumer report has been obtained about you, (2) disclosure of the nature and scope of any investigative consumer report and (3) a copy of your report.
Print Name including middle name):
Signature:
Date:
If under the age of 18, a parent/guardian signature must ALSO be obtained:
Parent/Guardian Signature:
Relationship to Candidate: