KILLINGLY PUBLIC LIBRARY YOUTH VOLUNTEER APPLICATION (UNDER 18) PRINT CLEARLY

TODAY'S DATE:	FIRST AND LAST NAME:	ADDRESS:
BEST CONTACT NUMBER:	LEGAL GUARDIAN'S NAME AND CONTACT:	LEGAL GUARDIAN'S EMAIL:
EMERGENCY CONTACT NAME:	EMERGENCY CONTACT NUMBER:	APPLICANT'S EMAIL:

PLEASE CHECK BELOW WHICH DAYS & TIMES YOU ARE AVAILABLE TO VOLUNTEER

DAYS/TIMES AVAILABLE	MON	TUES	WED	THURS	FRI	SAT
Morning (10-Noon)						
Afternoon (Noon-2)						
Afternoon (2-4)						
Evening (4-6:30)						

Tell us which library jobs you're interested in.	I would like to help with... (Mark with "X")
CRAFT PREP	
EVENT HELP	
SHELF READING	
LIGHT CLEANING	

THANKS FOR WANTING TO VOLUNTEER! WE APPRECIATE IT!

VOLUNTEER APPLICANT'S STATEMENT:

I understand that I am applying to be an unpaid volunteer for the Killingly Public Library and that this application is not an application for employment. If I am accepted as a volunteer, I agree that I will abide by the library's policies and procedures and commit to volunteer until a point of time mutually agreed to by both myself and the Library.

I authorize the Town of Killingly to order a background check report containing information about me. All background verification information obtained will be kept CONFIDENTIAL to the extent permitted by law.

Have you ever been convicted of a crime? Yes No	Social Security Number:	Date of Birth:

- If yes, please give information regarding the nature of the charge, the date and location of conviction and the final disposition of the case.

Applicants are not required to disclose the existence of an arrest, criminal charge or conviction for which records have been "erased". The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and, (e) a conviction for which the person received an absolute pardon. Any applicant whose criminal records were erased will be considered to have never been arrested and may so swear under oath.

I understand that the information provided above will not necessarily result in the rejection of my application, but that the nature of the information will be considered as it related to the performance of the job duties in question and in light of the requirements of state and federal law.

APPLICANT'S SIGNATURE:_____

GUARDIAN'S SIGNATURE:_____

DATE:_____

RECEIVED: _____

FCRA NOTICE – BACKGROUND INVESTIGATION

In connection with your employment/volunteer application with the Town of Killingly (the "Company"), this notice is intended to inform you that a consumer report will be obtained on you from a consumer reporting agency for employment purposes. These purposes may include for hiring, retention, promotion or reassignment during your employment or volunteering with the Town of Killingly. The report may contain information about you relating to your criminal information or history, driving and/or motor vehicle records, verification of your education or employment history, social media or other background checks.

AUTHORIZATION FOR BACKGROUND INVESTIGATION

By signing below, you hereby authorize the obtaining of consumer reports by the Town of Killingly at any time after receipt of this authorization and throughout the course of your employment.

You understand that the scope your authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment, and allow the Town of Killingly to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

I hereby authorize the obtaining of consumer reports by the Town of Killingly at any time after receipt of this authorization. To this end, I authorize any law enforcement agency, administrator, 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 Town of Killingly.

Signature:	Print Name (including middle name):
Date:	Social Security Number:
Driver's License # and State of Issuance:	Date of Birth:
Email Address:	Current Address: