

Memo

To: All Applicants for School Employee Positions
 From: Jan O. Guarino, Assistant Superintendent for Personnel
 Re: Criminal History Record Checks and Fingerprinting

In accordance with Public Act No. 93-328, as amended, effective July 1, 1994 every applicant for a position with the Wallingford Public Schools must provide certain information regarding any criminal history, and every person who is hired for a position must submit to a state and national criminal record check, including fingerprinting.

An 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-146, 54-76o or 54-142a. Criminal records subject to erasure pursuant to these statutes 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 nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon. A person whose criminal records have been erased pursuant to these statutes shall be deemed to have never been arrested within the meaning of the statutes with respect to the proceedings so erased and may so swear under oath.

In this connection, please provide the following information:

1. Have you ever been convicted for any violation of any law?

YES NO If "YES," list ALL cases, giving details in the spaces below. (If you require additional space, please attach a separate sheet of paper.)

DATE	PLACE AND COURT	OFFENSE	DISPOSITION

2. Do you have any criminal charges pending against you at the time of this application?

YES NO If "YES," list ALL charges, giving details in the spaces below. If "NO," please note that you have an ongoing obligation to inform us of any charges that arise while your application is being processed. (If you require additional space, please attach a separate sheet of paper.)

DATE	PLACE AND COURT	OFFENSE

By your signature below, you agree to the following in connection with your application for a position:

- a. I authorize the release to a representative of the Wallingford Public Schools of any and all information that may be in the possession of any of my former employers concerning me, my work record and my reputation, any prior criminal background investigation and finger print check, including information of a confidential or privileged nature.
- b. I further authorize the Wallingford Public Schools to obtain any and all police records should they exist.
- c. I hereby release the Wallingford Public Schools, its officials, employees, representatives, agents and Board of Education members, my former employers and their employees and agents, and local police officials from any liability or claim for damages which may result from the information furnished and obtained as referenced above.
- d. Upon notification of a decision by the Wallingford Public Schools to hire me for the position I have applied, I agree to submit to state and national criminal history records checks, including fingerprinting. No later than ten calendar days after I have been provided with the fingerprinting packet, I agree to complete the fingerprinting process in accordance with the arrangements established by the Wallingford Public Schools. My failure to comply with the above timeline, without good cause, will be grounds for withdrawal of the offer of employment or termination of employment, if I have already commenced working in my new position.
- e. I agree to pay all fees and costs associated with the fingerprinting process and/or the submission or processing of the requests for state and national criminal record checks.
- f. I understand and agree that my falsification or omission of any information on my employment application and in any job interview, including but not limited to information concerning criminal convictions or pending criminal charges, shall result in my disqualification from consideration for employment or discharge from employment.
- g. I further understand and agree that decisions regarding the effect on my application for employment of criminal convictions which I have disclosed will be made by the Wallingford Public Schools on a case-by-case basis.

APPLICANT'S SIGNATURE _____

APPLICANT'S NAME (Printed/Typed) _____

ADDRESS _____

CITY/STATE/ZIP CODE _____

TELEPHONE NUMBER _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____

11/1/94
Revised 8/29/08
Revised 7/30/09
Revised 7/1/10