

Phone: (207) 286-9241
Fax: (207) 985-7589

ARUNDEL PARKS & RECREATION DEPARTMENT
JOB APPLICATION/BACKGROUND CHECK FORM
468 Limerick Rd., Arundel, ME 04046

Name: _____ Social Security #: _____ - _____ - _____

Previous full name(s) you were educated or worked under: _____

Address: _____

Home Phone: _____ Work Phone: _____ Date of Birth: _____

Current Employer and Address: _____

Volunteer/Work Interest 1. _____ 2. _____

Driver's License # _____ State _____ Exp. _____ U.S. Citizen Yes ___ No ___

REFERENCES: Please list three, preferably one of which has personal knowledge of your participation as a volunteer or paid employee in a youth program.

| <u>Name</u> | <u>Address</u> | <u>Phone</u> | <u>Position/Relationship</u> |
|-------------|----------------|--------------|------------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

EDUCATION

| <u>High School / College</u> | <u>No. of Years</u> | <u>Degree</u> |
|------------------------------|---------------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Do you have any training/certification in First Aid? Yes ___ No ___
Do you have any training/certification in CPR? Yes ___ No ___
Have you had the Hepatitis B vaccination? Yes ___ No ___
Do you now or have you ever used illegal drugs? Yes ___ No ___
Have you ever been convicted of a criminal offense other than any traffic violation not involving the use of alcohol? Yes ___ No ___
If yes, please explain _____
Have you ever been convicted of child neglect or abuse? Yes ___ No ___

I certify that all information provided on this application is true and correct. I give permission for the Town of Arundel to conduct a background check, which may include sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional. In the event that the Town receives information about me which the Town, in its discretion, finds to be conduct or behavior that is offensive or inappropriate, I understand that I will be immediately removed from my position without prior notice. I also understand that my appointment is subject to my adherence to the terms and conditions of the Town of Arundel Personnel Policy, violation of which may also result in my immediate removal. I hereby release and agree to hold harmless the Town of Arundel, its agents, officers, employees, volunteers and others who provide information in connection with this application from liability for any information provided in good faith.

Signature

Date

FOR OFFICE USE ONLY

Interviewed by: _____ Date: _____

Refused based on: _____

Criminal check done on: Date _____ By _____

Results: _____

Notes: _____