

Wolcott Public Schools

1488 Woodtick Road • Wolcott, Connecticut 06716
Telephone 203-879-8183 • Fax 203-879-8182

Superintendent of Schools
Anthony J. Gasper, Ed.D.

Assistant Superintendent
Shawn Simpson



Business Manager
Todd W. Bendtsen, C.P.A.

Director of Student Services & Alt. Programs
Kevin Hollis

Fingerprinting Process

Connecticut State Law (State Statute Number 10-151) and Public Act 93-328 requires all employees hired by a board of education be fingerprinted for national (Federal Bureau of Investigation) and state background checks. **Each employee/student teacher has within 30 days of his/her hire date to complete the process or employment will be terminated.** Wolcott Public Schools also requires volunteers to be fingerprinted for national and state background checks. The 30-day limit also applies to volunteers or they will not be allowed to volunteer. ****Applicant's Privacy Rights are attached (signatures required).***

Process:

*Sign *Applicant's Privacy Rights Acknowledgement Forms* and completed fingerprint cards.

Student teachers and volunteers must also complete and sign the *National Child Protection Act/Volunteers for Children Act Waiver and Consent Form*.

- ✓ Submit the complete package to the Business Office (all signed documents and processing fees).
 - ***Only complete packages will be accepted.***
- (1) On the green card provided by Wolcott Public Schools, you must enter your last, first, and middle name, maiden name or alias, complete mailing address, social security number, citizenship, date and place of birth, and personal information (sex, race, height, weight, and hair and eye color), and signature.
 - ✓ The spaces for OCA, FBI, and MNU numbers may be left blank if you do not have one of those numbers.
 - ✓ The green card is double sided, on the last line please list an emergency contact.
 - ✓ Cards with otherwise missing or incomplete information will be rejected by processing unit.
- (2) Take the green card to your local police department in the town where you live or to an agency authorized to take fingerprints (the agency may charge an additional fee).
 - You must present at least one form of picture identification to the organization taking the fingerprints.

Make certain hands are clean; do not use any creams or lotions before having prints taken. Individuals with fingerprints that are difficult to read may have to undergo this process more than one time.

Do not fold or bend the card or you will have to undergo this process more than one time. If for any reason fingerprint cards are rejected due to clarity issues, you will be notified by the Business Office. Once notified you will be required to have reprints taken within 30 days. (*Within the 30-day period additional fees will not be required for reprints.*)

- (3) Once you have filled out both sides of the green card, signed privacy forms and you have been fingerprinted, return to the Wolcott Public Schools Business Office with a **money order/ bank check for the appropriate fee(s).**

Employees - \$13.25 money order/bank check made payable to: "Treasurer – State of CT"

Student Teachers - \$11.25 money order/bank check made payable to: "Treasurer – State of CT"

***Volunteers** – (*TWO separate payments required – payments cannot be combined*)

Each money order/bank check made payable to: "Treasurer – State of CT"

- \$11.25 money order/bank check (Federal Background Check)
- \$75.00 money order/bank check (State Criminal Conviction History)

***Each volunteer fee requires a separate money order/bank check both should be made payable to: "Treasurer – State of CT"**

No cash or personal checks are allowed, must be a money order or a bank cashier's check.



**Wolcott Public Schools
Business Office
1488 Woodtick Road
Wolcott, Connecticut 06716**

**Phone: 203-879-8180
Facsimile: 203-879-8011
Website: www.wolcottps.org**

VOLUNTEER APPLICATION

Please note that in addition to completing this application, volunteers must be fingerprinted to ensure the safety and well-being of Wolcott's children. Thank you for your understanding and cooperation.

School in which you are volunteering (circle): Wolcott High Tyrrell Alcott Frisbie Wakelee

Position(s) for which you are volunteering: _____

Date you can begin: ____/____/____

Name (Last, First and Middle Initial): _____

Address: _____ **Town/State/Zip:** _____

Home Phone: _____ **Work Phone:** _____

Days/Hours available: _____

Are you over the age of 18? ____ Yes ____ No

Have you ever been convicted of a crime, other than a traffic violation? ____ Yes ____ No
(If Yes, describe the number of convictions, the specific offense(s) for which you were convicted and how many years ago the convictions(s) were entered.) _____

Employment History (most recent position):

Employer: _____
Employer's Address: _____
Employer's Phone: _____
Title(s)/Position(s) Held: _____
Job Duties: _____
Supervisor's Name: _____
Dates Employed: _____

Educational Background (list schools attended):

Name / Location of Institution: _____
Degree / Year Awarded: _____
Name / Location of Institution: _____
Degree / Year Awarded: _____

Special skill(s) or certification(s), license(s) or similar credentials that would be of benefit in this position

References

Provide three references, other than family members, who can attest to your performance/character:

Name

Years Known

Phone Number

ACKNOWLEDGMENT AND RELEASE TO OBTAIN INFORMATION

I have answered all of the above questions to the best of my ability. I hereby certify that there are no omissions of any kind, and no misrepresentations or falsifications, and that the above answers are true and accurate and are made in good faith. I understand and acknowledge that, if I am volunteering for the Wolcott Public Schools, any omission I have made or misrepresentation or falsification, may be grounds to discontinue further consideration of my application.

I hereby authorize and voluntarily release the Wolcott Public Schools to conduct any necessary inquiries and collect any necessary information as to my character, reputation and ability to perform in the position I am applying for, including but not limited to review of my educational and employment references and background, a criminal conviction history check, and I release from any liability any and all former employers or educators, or personal or other references who supply the Wolcott Public Schools with information about my background, education or employment history.

Signature: _____

Date: ____/____/____

Agency Privacy Requirements for Noncriminal Justice Applicants

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

If you need additional information or assistance, contact:

<p>Connecticut Records: Department of Emergency Services and Public Protection State Police Bureau of Identification (SPBI) 1111 Country Club Road Middletown, CT 06457 860-685-8480</p>	<p>Out-of-State Records: Agency of Record OR FBI CJIS Division-Summary Request 1000 Custer Hollow Road Clarksburg, West Virginia 26306</p>
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¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a (b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. **All notices must be provided to you in writing.**¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later), by the agency that will receive your criminal history results, when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- 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 to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

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Applicant Signature: _____ **Date:** _____

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STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION
Division of State Police

**National Child Protection Act/Volunteers for Children Act
 Waiver and Consent Form**

The criminal history record checks performed under the National Child Protection Act (NCPA), as amended by the Volunteers for Children Act (VCA), will determine if you, as a care provider (current or prospective employee, volunteer, contractor/vendor, or owner/operator), have been convicted of crimes that bear upon your fitness to be responsible for the safety and well-being of children (persons less than 18 years old), the elderly (persons 60 years of age or older), or individuals with disabilities (persons with a mental or physical impairment who require assistance to perform one or more daily living tasks). Pursuant to the NCPA/VCA, this form must be completed and signed by every current or prospective provider for whom criminal history records are requested by a **Governmental Qualified Entity (QE)**. QEs provide care, treatment, education, training, instruction, supervision, recreation, care placement services, or license/certify others who provide care to vulnerable populations (children, the elderly, or individuals with disabilities).

Requesting QE Information:

QE Name	
QE Address	
QE Telephone Number	

I am a current or prospective (check one): Employee Volunteer Contractor/Vendor Owner/Operator

I have been convicted of or pled guilty to a crime. No Yes

If yes, please provide a description of the crime and the particulars of the conviction on the back of this waiver.

I hereby authorize the requesting QE to submit a set of my fingerprints to the Connecticut State Police Bureau of Identification (SPBI) and Federal Bureau of Investigation (FBI) for the purpose of accessing and reviewing state and national criminal history records that may pertain to me. I further understand the following:

- My fingerprints will be used to check the criminal history records of the SPBI and the FBI;
- I can receive a state criminal history record from the SPBI and a national criminal history record from the FBI pursuant to Title 28, Code of Federal Regulations, §16.30-16.34;
- I am entitled to challenge the accuracy and completeness of any information contained in such records;
- The QE may choose to deny me unsupervised access to persons to whom the QE provides care until the criminal history record check is completed; and
- I may obtain a prompt determination as to the validity of my challenge before a final decision is made.

By signing this Waiver, it is my intent to authorize the dissemination of any state or national criminal history record which may pertain to me, to the requesting QE. I have read and understood the foregoing and the information provided is true and accurate to the best of my knowledge and belief.

*Printed Name: _____ Signature: _____

*Date of Birth: _____ *Address: _____

*as it appears on a valid identification document issued by a governmental agency

NOTE: The original waiver must be retained by the QE for at least one year of fingerprint submission date. A copy of the waiver must be sent to the State Police Bureau of Identification, Criminal Records Units, at 1111 Country Club Road, Middletown, CT 06547.