



## TOWN OF ST. FRANCISVILLE Employment Application Disclosure Regarding Background Investigation

Disclosure Regarding Background Investigation Town of St. Francisville (“the Organization”) may obtain information about you from a consumer reporting agency for consideration of the opportunity to serve as an employee/volunteer with the Organization. Thus, you may be the subject of a “consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, motor vehicle records (“driving records”), or other background checks. Please be advised that the nature and scope of the most common form of consumer report obtained with regard to applicants for volunteering is a criminal record report conducted by Background Investigation Bureau, LLC, (“BIB”), 971 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900.

### **AUTHORIZATION AND ACKNOWLEDGEMENT REGARDING BACKGROUND INVESTIGATION**

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION, “A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT”, “ADDITIONAL STATE LAW NOTICES”, and certify that I have read and understand those documents. I hereby authorize Town of St. Francisville (“the Organization”) to obtain “consumer reports” about me at any time after receipt of this authorization and, if I am allowed to serve, throughout term of my volunteer/employment service. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, institution, school or university (public or private), information service bureau, past or present employer or supervisor, private business, insurance company or personal reference, and/or other persons to furnish any and all background information requested by BIB, additional third-party organizations acting on behalf of Organization, and/or Organization itself. I agree that a Facsimile (“fax”) or photographic copy or digital copy of this Authorization shall be as valid as the original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

- \_\_\_\_\_ Please check acknowledging that you are seeking a volunteer opportunity and not employment from the Organization
- \_\_\_\_\_ Please check if you are a Minnesota or Oklahoma applicant or employee and would like to receive a copy of a consumer report if one is obtained by the Organization
- \_\_\_\_\_ Please check if you are a California applicant or employee and you would like to receive a copy of an investigative consumer report of consumer credit report if one is obtained by the Organization at no charge whenever you have a right to receive such under California law. By signing above, you also acknowledge receipt of the notice regarding background investigation pursuant to California law.



# TOWN OF ST. FRANCISVILLE Employment Application

## AN EQUAL OPPORTUNITY EMPLOYER

It is our policy to comply fully with all federal, state, and local equal employment opportunity laws. This organization provides equal employment and advancement opportunities for all persons regardless of race, creed, sex, national origin, age, religion, disability, marital status, sexual orientation or any other classification protected by law.

Employees of this organization are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the organization's elected officials. Each employee is expected to conduct him / herself in a manner which reflects favorably upon the organization and recognize that our employees are subject to public scrutiny in their public and personal lives.

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Are you at least 18 years old? YES NO

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Salary Requirements: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Referred by: \_\_\_\_\_

Are you a citizen of the United States? YES NO If no, can you provide verification of your legal right to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when & dept.?

Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Do you have a valid drivers license? YES NO

DL #: \_\_\_\_\_ State: \_\_\_\_\_

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

## Special Skills / Certifications / Job Related Training

List any special skills, certifications, or related training you have received.

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**Do you have any job-related computer experience?**

YES  NO

Excel: \_\_\_\_\_

Word: \_\_\_\_\_

Other: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

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Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_