

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

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

Name (FIRST, MIDDLE, LAST): _____

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

Address: _____

Home Phone: _____ Cell Phone: _____ Date of Birth: _____

Volunteer/Work Interest: _____ Email address: _____

Current Employer and Address: _____

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 working with children.

Name	Email address	Phone	What is your relationship to this person?
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EDUCATION

High School/ College	No. of Years	Degree
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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 Hepatits 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, driving, 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: _____