

Home Phone (____) _____

Cell Phone (____) _____ Birthdate _____ State of Birth _____

Gender: ___Male ___Female

Ethnicity: ___African American ___Asian ___Asian/Pacific ___Caucasian ___Hispanic ___Native
American ___Other Affiliation _____

Emergency Contact Name _____ Phone (____) _____

Skills and Interests/Language spoken _____

Preferred Location: Northeast Wyandotte County Lab, Kansas City, KS _____
Linwood Center, Kansas City, MO _____

Area of Interest:

- Digital Literacy Training
 - NorthStar Digital Literacy
 - Parent Engagement
 - Youth Programming
 - Microsoft Office Certification
 - CISCO
- Open Lab Mentoring
- Computer Refurbishing

Availability:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10-12__	10-12__	10-12__	10-12__	10-12__	12-2(KS)__
12-2__	12-2__	12-2__	12-2__	12-2__	
1-3__	1-3__	1-3__	1-3__	1-3__	2-4(KS)__
2-4__	2-4__	2-4__	2-4__	2-4__	
5-7__ (MO)	5-7__(MO)	5-7__ (MO)	5-7__ (MO)		

Have you ever had a conviction, suspended sentence, diversion agreement or other judgment against you for any matter listed below? Your answers should include any matter resolved on a plea of guilty or nolo contendere (no contest) and any matter expunged, annulled or sealed.

1) Any felony or misdemeanor? ___ Yes ___ No

2) Any municipal ordinance violation? ___ Yes ___ No

3) Any DUI/DWI? ___ Yes ___ No

4) Is your driver's license currently suspended? ___ Yes ___ No

5) Are any felony, misdemeanor or municipal charges currently pending against you or are you currently out on bail or on your own recognizance awaiting trial? ___ Yes ___ No

6) Have there ever been allegations, complaints or reports regarding your involvement in child abuse or neglect (regardless of whether the incident was confirmed or denied)? ___ Yes ___ No

If you answered Yes to any of the above, please provide date, description and explanation of each incident _____

Applicant's Authorization and Agreement

I understand that all information, including driver's license, criminal background and child abuse/neglect records and sex offender registry, will be verified and may be disclosed to the Connecting For Good Staff; I hereby consent to such verification and disclosure. I declare that all the statements I have made on this application are true, correct and complete to the best of my knowledge. I understand that the Connecting for Good Staff, at their sole and complete discretion, may accept or decline this application without providing me any reasons for the decision.

Applicant's Signature: _____

Date: _____

REQUEST FOR CHILD ABUSE OR NEGLECT/CRIMINAL RECORD

Have you ever been charged/plead guilty to or been convicted of any criminal act in this state or any state?

YES (Complete section below) NO, I have not been charged/pled guilty to or been convicted of any criminal offense in this state or any state.

Date City State County Circumstances (Identify charges, attach separate page, if necessary.)

Have you ever been substantiated as a perpetrator in any child abuse or neglect report made to the Division of Family Services in this state or any state?

YES (Complete section below) NO, I have not been substantiated as a perpetrator in any child abuse or neglect report.

Date City State County Circumstances (Identify charges, attach separate page, if necessary.)

The information provided is complete and accurate to the best of my knowledge. I understand it is unlawful to withhold or falsify information required on this form. I grant permission to the Department of Social Services to obtain any and all information needed to process my request and to use the information as permitted by law.

SIGNATURE OF APPLICANT: **(REQUIRED IN INK)**

DATE: _____

<h2>Office Use Only</h2>

Date CFG Received Application: _____

Date Sent to Screening: _____

Date Received Results: _____

Start Date: _____