

Early Childhood Learning Center  
PO Box 399  
South Cairo, NY 12482

INFORMATION SHEET

<input type="checkbox"/> <b>Substitute</b> (High School Diploma/GED required)	<input type="checkbox"/> <b>Volunteer</b>	<input type="checkbox"/> <b>Student</b>
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*All staff will be formally cleared through the NYS Central Child Abuse Registry,  
the NYS Office of Children & Family Services Criminal History Review Unity,  
and any and all agencies as required by State and Federal Regulations.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Are you the parent of a current student?  yes  no

Education: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A copy of your High School Diploma/GED must be attached to this form**

**Work Experience:**

Employer: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ Position \_\_\_\_\_

Employer: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ Position \_\_\_\_\_

Employer: \_\_\_\_\_ Dates of Employment \_\_\_\_\_ Position \_\_\_\_\_

**REFERENCES (No Relatives or Significant Partners)**

Supervisor: Company: Phone #:	Supervisor: Company: Phone#:	Personal: Relationship: Phone#:
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**Please indicate which sites you are available for:**

<input type="checkbox"/> Cairo	<input type="checkbox"/> Catskill	<input type="checkbox"/> Greenville	<input type="checkbox"/> Prattsville	<input type="checkbox"/> South Cairo
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**Please list specific days/times you are *available*:** \_\_\_\_\_

**CONVICTION STATEMENT:** In accordance with Section 390-b(1)(a) of the Social Services Law, I certify that to the best of my knowledge and belief,  **I Have**  **I Have Not** been convicted of a crime in New York State or any other jurisdiction. If I have been convicted of a crime, I will provide true and accurate information concerning the crime for which I was convicted, the date of conviction and any other relevant information in the space provided below. In addition, I will provide written justification on the back of this sheet, explaining why I should be allowed to have contact with children regardless of my conviction. ***I am aware that this will be my only opportunity for this explanation to be considered in the decision to approve or deny my employment.***

In accordance with Federal regulations, I certify that, to the best of my knowledge and belief,

**I Have**  **I Do Not Have Any**

- i) pending or prior criminal arrests and charges related to child sexual abuse and their disposition; or
- ii) convictions related to other forms of child abuse or neglect

If any, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Agency may call any and all employers and/or references in relationship to the position for which you have applied.

I give ECLC permission to contact the above references and any former employers.

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

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