

Southern Ky Performing Arts Foundation Inc. Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, color, national origin, age, religion, sex, sexual orientation, known disability or any other characteristic protracted by law.

Personal Informa	ition			Date of Appl	ication
Nama					
Name:		First		Middle	
Address:					
Phone Number			Mobile Phone Number		
E-Mail Address				_	
JOB INTEREST					
Position Applied For				Available to	Start
How did you hear of this	opening?				
Indicate Availability to W	Vork:	Full Time/Pa	rt Time/Days/Evenings		
Have you ever been emp	ployed by us before:	Yes/No	Are you legally permitted	d to work in tl	nis country? Yes/No
Have you ever been conv	victed of a felony?	Yes/No			
If yes please explain:					
EDUCATION					
Туре	Name & Locati	on	Courses Take	n	Graduated Yes/No/Enrolled
High School					
College					
Other					

EMPLOYMENT HISTORY

Are you currently Employed?		
If so, may we contact your employer?		
(List previous employers beginning	with most recent)	
Company Name		
Address		
Supervisor	Position	
Employment Dates	Ending Salary	
Reason for Leaving		
Company Name		
Address		
Supervisor	Position	
Employment Dates	Ending Salary	
Reason for Leaving		
Company Name		
Address		
Supervisor	Position	
Employment Dates	Ending Salary	
Reason for Leaving		
Please explain any interruptions in your employe	ment history	

Professional References

(Please list three references not related to you who have known you for at least one year.)

Name		Telephone	Address	Years known
PLEASE RE <i>F</i>	AD CAREFULLY AND CHECK	THE CORREPONDING BOX.		
		ion provided by me on this application nat, if disclosed, would alter the integr	is true and complete to the best of my	knowledge and that I
	I authorize my previous e educational record.	employers, schools, or persons listed a	s references to give any information re	garding employment or
			ll not be held liable in any respect if a j statements, omissions, or answers ma	
		oloyment with the SKyPAC Foundation ommunication distributed to the empl	, I will comply with all rules and regula oyees.	tions as set by the Sky
	terminate the employme	: <u>=</u>	will", which means that either I or the ithout prior notice, and for any reason	
	Limitation on Claims: I agree that any claim or suit against the Southern Kentucky Performing Arts Center Foundation of any or its subsidiaries or affiliates arising out of any employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within one year of the event giving rise to the claim or be forever barred. I waive any statute of limitations to the contrary.			
=	-	d and understand the above statement w consent to these statements.	ts. I have read, understand, and by my	checking the
Signature			Date	
Print Name	<u>:</u>			

CONFIDENTIAL

SKyPAC

Background Check Authorization

Print Name:				
(First)		Middle)	(Last)	
Former Names(s) and Da	tes Used:			
Current Address Since: _				
	(Mo/Yr)	(Street)	(City)	(State/Zip)
Previous Address Since: _				
	(Mo/Yr)	(Street)	(City)	(State/Zip)
Previous Address Since: _				
	(Mo/Yr)	(Street)	(City)	(State/Zip)
Social Security Number:			Date of Birth:	
Telephone Number:				
Driver's License Number,	/State:			
·				
The information contained	ed in this appli	cation is correct to the	best of my knowledge. I her	eby authorize SKyPAC
and its designated agents	s and represen	tatives to conduct a co	omprehensive review of my b	ackground causing a
			be generated for employmen	
	· ·	· ·	t/investigative consumer rep	•
			ty number; current and previous	
	_		nces; drug testing, civil and co ounty jurisdictions; driving rec	· ·
any other public records.		or all reactal, state, ec	ranty jurisdictions, arrying rec	oras, sireir recoras, aria
I further authorize any in	dividual, comp	oany, firm, corporation	, or public agency (including t	the Social Security
			and all information, verbal o	
me, to SKyPAC or its age	nts. I further a	authorize the complete	release of any records or da	ta pertaining to me
which the individual, con	npany, firm, co	rporation, or public ag	ency may have, to include in	formation or data
received from other sour	ces.			
			nd its agents, officials, repres	
= =			both individually and collective	•
because of compliance w		•	e, result to me, my heirs, fam release.	ily, or associates
Signature:			Date:	

SOUTHERN KENTUCKY PERFORMING ARTS CENTER APPLICANT BACKGROUND CHECK GUIDELINES

Goal

It is the goal of the Warren County Sheriff's Office to check the background of each of the named applicant or volunteer participating in the operation of the Southern Kentucky Performing Arts Center to ensure the safety of all of the involved citizens of Warren County.

Information Exchange

SKyPAC shall be responsible for bringing the applications to the Warren County Sheriff's Office Records Section for the background checks to be completed. They shall be hand delivered not faxed. It shall be understood that the background checks are second priority to the normal function of the WCSO Records Section. SKyPAC shall be responsible for making sure that the applications are legible and have the appropriate identifiers on the application for the background check. For a thorough check through AOC records, the applications must have name, any maiden names / previous names, address, at least a partial Social Security Number, and the applicant's date of birth. If the forms are not legible, the WCSO records section will not be able to review or check records on that particular application.

WCSO is only utilizing the AOC's Court Net program, Kentucky State Police Sex Offender Registry, and local warrant databases when checking backgrounds on the Southern Kentucky Performing Arts Center applicants. It is understood that WCSO is not able by law to run a full FBI Criminal History query for this process. This system is reserved for Criminal Justice

purposes only. Warren County Sheriff's Office is not responsible for any records or history that may not be discovered during this process. This is not a comprehensive or complete criminal history process. In this agreement, the applicant must have given their consent for the WCSO to disclose information resulting from the background check with SKyPAC.

Reasons for Denial

Reason for denial of SKyPAC applicants can be but may not be limited to any of following reasons where the applicant has been *charged with* any of the following offenses. This is not to say that the applicant has been convicted of this offense, merely that they have a matching charge on their record. Again, it is up to SKyPAC to decide if any applicant can be accepted once the WCSO Records Section has denied the application. Another reason that an applicant could be denied would be for falsifying any information on the application to SKyPAC or any related paperwork.

The applicant can not have any of the following charges on their record:

- Any active or outstanding warrants of arrest
- Any felony offense
- Any offense involving a minor
- Any offense involving any type of violence or assault
- Any offense involving the carrying of a concealed deadly weapon (handguns, knives, brass knuckles and any other item that is covered by KRS)
- Any offense involving eluding or attempting to elude police
- Any offense involving possession, use, intoxication of, selling of, or promoting of illegal drugs or drug making materials
- Any offenses involving theft, burglary, or robbery
- Offenses involving alcohol within the last 24 months (these situations shall be reviewed on a case by case basis by SKyPAC)

Accepted / Approved Applications

Applications that have been reviewed and appear to be in compliance with the standards of the background process will be stamped with "WCSD RECORDS" in the bottom right corner.

Denied / Rejected Applications

Applications that have been reviewed and appear to be out of compliance with the standards of the background process will be stamped with "REJECTED WCSD RECORDS" in the bottom right corner.

Appeal Process

Any applicant that was denied by the WCSO during background check may choose to appeal the denial. The denied party shall contact SKyPAC for further information. WCSO will not discuss the process with the individual applicants. It shall be the decision of the leaders of SKyPAC to progress forward with any applicant that was denied by WCSO. This decision making authority lies solely with SKyPAC.

WARREN COUNTY SHERIFF'S OFFICE SOUTHERN KENTUCKY PERFORMING ARTS CENTER BACKGROUND CONSENT FORM

I have read and understand the agreement between the Warren County Sheriff's Office and Southern Kentucky Performing Arts Center regarding the process for background checks. By affixing my signature and attaching my application, I hereby grant consent for background check to be completed by the Warren County Sheriff's Office. I further consent and grant the release of my information to the SKyPAC personnel for discussion when considering my pending application. I also understand by not signing this release, I will be unable to be considered for employment or volunteer activity in activities with SKyPAC. Additionally, I understand that WCSO is not able by law to run a full FBI Criminal History query for this process. This system is reserved for Criminal Justice purposes only. Warren County Sheriff's Office is not responsible for any records or history that may not be discovered during this process. This is not a comprehensive or complete criminal history process.

Applicant Signature	Date
Print Name	