

APPLICATION FOR EMPLOYMENT – Robert L. Perry Juvenile Justice Center Addendum

Beginning January 2015, the Robert L. Perry Juvenile Justice Center is in compliance with the final standards implementing the Prison Rape Elimination Act (PREA) issued by the U.S. Department of Justice. The following questions are being asked of all applicants who may have contact with youth in residential care as part of their regular job or volunteer duties.

INSTRUCTIONS

To be completed only by applicants with the Robert L. Perry Juvenile Justice Center. This includes all prospective employees, existing employees interviewing for JJC positions, and volunteers.

NAME (LAST, FIRST, MIDDLE, SUFFIX)

1. HAVE YOU PREVIOUSLY WORKED IN OR VOLUNTEERED FOR A PRISON, JAIL, LOCKUP, COMMUNITY TREATMENT CENTER, HALFWAY HOUSE, RESTITUTION CENTER, MENTAL HEALTH FACILITY, ALCOHOL OR DRUG REHABILITATION CENTER, JUVENILE FACILITY OR OTHER CORRECTIONAL FACILITY (PUBLIC OR PRIVATE)?

- NO** If "no", proceed to #3.
- YES** If "yes", complete the following (attach additional pages if necessary).

FACILITY #1

FACILITY NAME

ADDRESS

CONTACT PERSON

PHONE NUMBER

POSITION WORKED

EMPLOYMENT DATES

EMPLOYEE NAME WHILE EMPLOYED (IF DIFFERENT THAN ABOVE)

FACILITY #2

FACILITY NAME

ADDRESS

CONTACT PERSON

PHONE NUMBER

POSITION WORKED

EMPLOYMENT DATES

EMPLOYEE NAME WHILE EMPLOYED (IF DIFFERENT THAN ABOVE)

FACILITY #3

FACILITY NAME

ADDRESS

CONTACT PERSON

PHONE NUMBER

POSITION WORKED

EMPLOYMENT DATES

EMPLOYEE NAME WHILE EMPLOYED (IF DIFFERENT THAN ABOVE)

2. WHILE WORKING OR VOLUNTEERING AT ANY FACILITY, WERE YOU TERMINATED OR OTHERWISE DISCIPLINED OR COUNSELED FOR SEXUAL ABUSE, SEXUAL CONTACT WITH OR SEXUAL HARASSMENT OF AN INMATE, DETAINEE, CLIENT OR RESIDENT OF THE FACILITY?

- YES** **NO** If "yes", identify the facility name and explain the circumstances.

3. HAVE YOU BEEN FOUND BY A CIVIL OR ADMINISTRATIVE BODY TO HAVE ENGAGED IN SEXUAL ACTIVITY OR ATTEMPTED SEXUAL ACTIVITY FACILITATED BY FORCE, OVERT OR IMPLIED THREATS OF FORCE, OR COERCION, OR IF THE VICTIM DID NOT CONSENT OR WAS UNABLE TO CONSENT OR REFUSE? THIS INCLUDES ANY ACTIONS TAKEN UPON A PROFESSIONAL LICENSE OR A PROFESSIONAL REGISTRY AND ANY INTERNAL ADMINISTRATIVE INVESTIGATION RESULTS.

YES NO If "yes", identify the civil or administrative agency or body below and explain the circumstances.

READ VERY CAREFULLY BEFORE SIGNING

I certify the information contained in this application addendum is true and complete to the best of my knowledge and belief. I understand that should an investigation at any time disclose any such misrepresentation, falsification, or concealment as to a material fact, it will be sufficient grounds for rejection of my application and/or removal from employment. I authorize the Robert L. Perry Juvenile Justice Center to investigate, obtain and compile information concerning my employment history; and to conduct a pre-employment background check and annual record review of myself, including information pertaining to any report of sexual abuse, sexual contact with or sexual harassment of an inmate, detainee or resident of a prison, jail, lockup, community treatment center, halfway house, restitution center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correctional facility (public or private) or report of engaging in sexual activity or attempting sexual activity involving force or inflicted upon a person unable to consent. I release Robert L. Perry Juvenile Justice Center from any legal liability that may result from these investigations. I release any past employer or professional registry/licensing agency from any legal liability and waive all provisions of law forbidding disclosure of any information they acquired relative to my employment, and investigations or administrative proceedings involving myself. I consent that via a copy of this application addendum, they may disclose such information to Robert L. Perry Juvenile Justice Center. I understand that any offer of employment is conditional upon results of background checks.

PRINT NAME (FIRST, MIDDLE, LAST)

SIGNATURE	DATE
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RE-EMPLOYMENT REFERENCE CHECK

CANDIDATE NAME

POSITION APPLIED FOR

COMPANY CONTACTED

TELEPHONE NUMBER

PERSON CONTACTED

TITLE

REFERENCE CHECKED BY

TITLE

DATE

WHAT WERE HIS/HER EMPLOYMENT DATES WITH YOUR COMPANY?.

FROM:

TO:

THE CANDIDATE INDICATED ON HIS/HER APPLICATION THAT THE REASON FOR LEAVING YOUR COMPANY WAS

IS THIS ACCURATE OR ARE THERE OTHER REASONS WHY THE CANDIDATE LEFT YOUR COMPANY?

WHAT JOB TITLE DID HE/SHE HOLD?

PLEASE DESCRIBE THE TYPE OF WORK FOR WHICH THE CANDIDATE WAS RESPONSIBLE.

WHAT WAS YOUR EMPLOYMENT RELATIONSHIP WITH THE CANDIDATE?

DESCRIBE THE CANDIDATE'S PERFORMANCE ON THE JOB (E.G., QUANTITY AND QUALITY OF OUTPUT GENERATED BY THE CANDIDATE).

DESCRIBE THE CANDIDATE'S RELATIONSHIPS WITH COWORKERS, SUBORDINATES (IF APPLICABLE), AND WITH SUPERIORS?

DID THE CANDIDATE HAVE A POSITIVE OR NEGATIVE WORK ATTITUDE? PLEASE ELABORATE.

WHAT WERE HIS/HER STRENGTHS ON THE JOB?

WHAT WERE HIS/HER WEAKNESSES ON THE JOB?

HOW WAS HIS/HER PUNCTUALITY AND ATTENDANCE?

WHAT IS YOUR OVERALL ASSESSMENT OF THE CANDIDATE?

WOULD YOU REHIRE THIS INDIVIDUAL?

YES NO If no, why?

DO YOU HAVE ANY ADDITIONAL COMMENTS?

Robert L. Perry Juvenile Justice Center (JJC) Staff ONLY

Did the applicant indicate that they have previously worked at or volunteered in a prison, jail, lockup, community treatment center, halfway house, restitution center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correction facility (public or private)?

YES NO If no, further action is not required. If yes, contact the facility and ask the questions below.

Note: If the applicant discloses on the Application for Employment – Robert L. Perry Juvenile Justice Center addendum that he/she was found to have engaged in sexual activity or attempted sexual activity involving force or inflicted upon a person unable to consent, or civilly or administratively adjudicated to have engaged in this activity, refer the application to the Court Administrator for guidance before making a hiring recommendation.

1. The applicant has indicated that they were employed with your facility on the following dates:
Are these dates accurate? YES NO If no, explain.

2. Pursuant to the requirements of Prison Rape Elimination Act (PREA), while working or volunteering at this facility, was the individual terminated or otherwise disciplined or counseled for sexual abuse or sexual harassment of an inmate, detainee, client or resident of the facility?

YES NO If yes, explain the circumstances.