

ROCHELLE CENTER

APPLICANT BACKGROUND CHECK DISCLOSURE

NOTICE: All applicants for employment by the Rochelle Center must consent to a **BACKGROUND CHECK** and **MAKE FULL DISCLOSURE OF ANY AND ALL CONVICTION(S)**. Failure to consent to **BACKGROUND CHECK** and/or the accurate disclosure of past or current convictions will render the applicant ineligible for employment consideration. Disputed Background Checks may be contested by any applicant. The Applicant must submit to Tennessee Bureau of Investigations of the Federal Bureau of Investigations for a fingerprint sample and background report at the applicant's own expense.

PLEASE REVIEW THE FOLLOWING EMPLOYMENT REQUIREMENTS BEFORE SUBMITTING YOUR APPLICATION FOR EMPLOYMENT.

- Pursuant to a **CONTRACTUAL AGREEMENT** between the **ROCHELLE CENTER** and the **STATE OF TENNESSEE, DEPARTMENT OF MENTAL RETARDATION SERVICES**, the Rochelle Center is unable to employ “any individual as staff or volunteer who have direct contact with or direct responsibility for service recipients (consumers with disabilities) who have been convicted of a **FELONY** including but not limited to **MISAPPROPRIATION OF FUNDS, FRAUD, BREACH OF FIDUCIARY DUTY, NEGLIGENCE, CHILD ABUSE, or ACT INVOLVING PHYSICAL HARM TO AN INDIVIDUAL**
- Any individual who has been or is listed on the **REGISTER OF SEXUAL OFFENDERS** or on the **DEPARTMENT OF HEALTH, ELDERLY or VULNERABLE ABUSE REGISTRY**;
- Any individual who has been convicted of a **MISDEMEANOR CRIME INVOLVING MORAL TURPITUDE WITHIN TEN (10) YEARS OF THE DATE OF THEIR POTENTIAL EMPLOYMENT**.

PLEASE RESPOND FULLY TO EACH OF THE FOLLOWING QUESTIONS.

(Failure to accurately respond will result in automatic rejection of your application for Employment)

1. Have you ever been convicted of a crime? _____ Yes _____ No

If yes, please list any prior convictions by any local, state, federal, or military court of any felony or any other conviction involving sexual crimes, including but not limited to rape, sexual assault, sexual battery, exhibitionism, voyeurism, or an attempt to commit any of such sexual crimes; homicide or attempted homicide; felonious assault or attempted felonious assault; unlawful breaking or entering; robbery; burglary; theft; arson; misappropriation of funds; fraud; breach of fiduciary duty; neglect; child abuse; or any act involving physical harm to an individual. (EXPLAIN FULLY)

2. Have you been required to register with the registry of sexual offenders in accordance with Tennessee Code Annotated, Section 38-6-110? _____ Yes _____ No If yes, please explain.

3. Have you been placed on the Department of Health Elderly or Vulnerable Abuse Registry? _____ Yes _____ No If yes, please explain.

4. Have you been convicted of any misdemeanor crime involving moral turpitude within ten (10) years of this date? _____ Yes _____ No If yes, please explain

SIGNATURE OF APPLICANT

DATE