



DAVINCI ACADEMY

COMMUNICATION • COLLABORATION • CITIZENSHIP • CONTEMPORATION • CREATIVITY • COMPETITION • CURIOSITY • COMPASSION • CONSERVATION

APPLICANT INFORMATION SHEET

Last Name	First	Middle	Social Security #
Address (include city, state, zip)			
Phone Number(s)			

E-Mail Address _____ Please select a school program where you will work:

Date of Birth: _____ Distance Elementary Secondary

Position:

Teacher Substitute Kitchen Aide Custodian SpEd Aide Volunteer
 Other

How did you hear about DaVinci? _____

References:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____



www.RedAppleFinance.com / www.TalentWise.com
Phone: (801)394-4140 Fax: (801) 820-3224

PERMISSION TO CONDUCT BACKGROUND CHECK

I understand and agree that: The information supplied on this release form is true and correct, to the best of my knowledge. The company has my authorization to thoroughly investigate my professional and personal history to generate a background screening report. I understand that the background report may include, but not limited to, the following areas: Employment History, Education History, Credit History, Criminal History, Drug Testing, Professional Licensing, Motor Vehicle Records, Social Media History, Residence History and References. A background check will be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I will hold no person liable for giving or receiving information in this investigation. I hereby authorize Merchants Information Solutions, an agent of the company, to make a thorough background investigation of all information given by me to the Company. I release from liability all persons, companies, and corporations supplying that information. Furthermore, I release and indemnify the Company and Merchants Information Solutions against any liability that might result from making such background checks. Upon request, DaVinci Academy will supply a copy of the completed background report along with a copy of an individual's rights under the Fair Credit Reporting Act. A copy of this form is valid as the original.

The following information is required for identification purposes when checking records. It is confidential and will not be used for any other purpose.

Applicant's Name (First,Middle,Last): _____

Applicant's Date of Birth: _____/_____/_____ Applicant's SS No: _____-_____-_____

Driver's License No: _____ State Issued: _____

Address (Current): _____

City: _____ State: _____ County: _____ Zip: _____

Phone Number: _____ Email: _____

Date of Request: _____/_____/_____ Company Requesting Report: _____

Please Check Position: **Volunteer** **Substitute** **New Employee**

For residents of California, Minnesota and Oklahoma: You will be provided with a free copy of any consumer reports or investigative consumer reports on you if you check this box:

Notice to New York Applicants: Under Article 25 Sec 382-g of the NY General Business Law, should a consumer report received by an employer contain criminal conviction information the employer must provide to the applicant or employee who is the subject of the report, a printed, or electronic copy of Article 23-A of the New York Corrections Law, which governs the employment of persons previously convicted of one or more criminal offenses.

Applicant Signature: _____ Date: _____/_____/_____