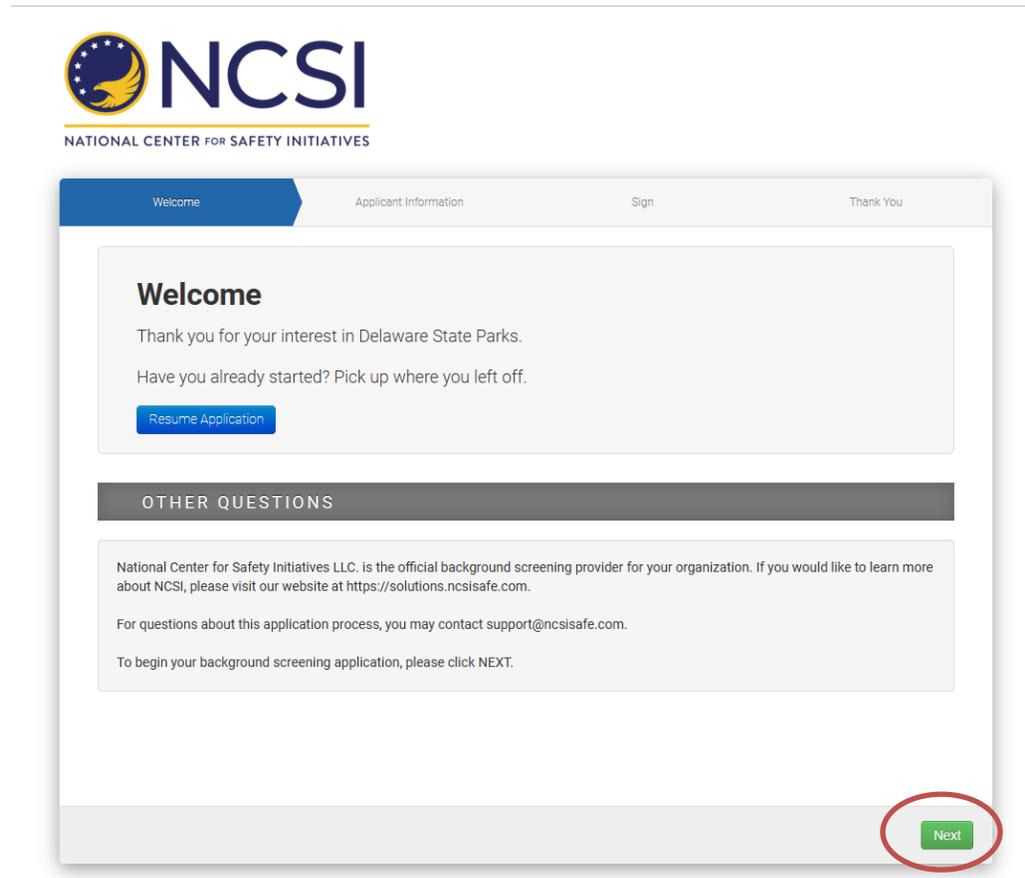


Background Check Instructions

PLEASE LET ALLI KNOW YOU SUBMITTED. This gets sent into the larger state system and there is no way for the state employee to know which site applications are from.

Direct link: <https://delawarestateparks.quickapp.pro/>



The first page you will encounter will have two buttons on it. Scroll down to the bottom of the page to the green “Next” button in the lower right corner. If you’re resuming an application that you started, click on the blue “Resume Application” button.

Welcome Applicant Information Sign Thank You

APPLICANT INFO

TO AVOID DELAYS IN THE RETURN OF YOUR BACKGROUND SCREENING RESULTS, PLEASE MAKE SURE YOU:

- Enter your full LEGAL name - DO NOT use nicknames or initials.
- Double-check your entry for accuracy before continuing with your submission.

Name * DOB *

Please provide the name on your government issued ID if it differs from the Full LEGAL name provided above SSN *

Email * To avoid delays: if you have Puerto Rico address history, please provide your Mother's maiden name.

Phone *

On the main application page, fill out the information. Enter your full LEGAL name - DO NOT use nicknames or initials, as this will delay your test. Keep scrolling down to fill out the rest of the application.

You will be required to attach a copy of a government issued ID, such as a Driver's License or Passport. If you have trouble uploading a copy, we can help you with the application in the FAH office.

The screenshot shows a web form with several sections. At the top is a dark grey header with a cloud icon and the text "REQUESTED DOCUMENT(S)". Below this is a light grey box containing the text "IMPORTANT! READ BELOW BEFORE CONTINUING:" followed by "To prevent possible delays in the screening process, please attach a copy of an ID such as a Drivers License or Passport." Underneath is a blue "Upload" button circled in red, next to the text "Government Issued ID".

The next section is a dark grey header with the text "ADDRESS HISTORY". Below it is a light grey box with the text "The application will accept only the two-letter state abbreviation in the ST field (ex. CO for Colorado)."

The following section is a dark grey header with the text "CURRENT". Below this are two radio buttons: "Domestic" (selected) and "International". Underneath is the text "Address *" followed by a text input field labeled "Street" containing the word "Street". Below that are three input fields: "City", "ST", and "Zip".

At the bottom of the form is a light grey bar containing a "Back" button on the left and a green "Next" button on the right, which is circled in red.

Submit your current address and then click the green “Next” button.

Welcome Applicant Information **Sign** Thank You

STATE AND CITY NOTICES

I certify that I am an individual seeking prospective or continued employment to work in:

Delaware

I am a resident of:

Please Select

Back Next

This section can be a little confusing with the wording, because you will be volunteering and not working here, but select for the first question, “Delaware”. The second drop-down question is the state you live in.

Welcome Applicant Information **Sign** Thank You

SIGNATURE (1 OF 4)

ELECTRONIC SIGNATURE CONSENT

As part of the selection process at Delaware State Parks, the "Company," you will need to consent to a background check electronically. By typing your name, you are consenting to receive any communications (legally required or otherwise) and all changes to such communications electronically. In order to use the website, you must provide at your own expense an Internet connected device that is compatible with the minimum requirements outlined below. You also confirm that your device will meet these specifications and requirements and will permit you to access and retain the communications electronically each time you access and use the website.

System Requirements to Access Information

To receive and view an electronic copy of the Communications you must have the following equipment and software:

- A personal computer or other device which is capable of accessing the Internet. Your access to this page verifies that your system/device meets these requirements.
- A current version of Chrome, Firefox, Safari, Internet Explorer, or Microsoft Edge Internet web browser which supports security industry best practices for HTTPS encrypted communications, JavaScript, and cookies. Your access to this page verifies that your browser meets these requirements.

System Requirements to Retain Information

To retain a copy, you must either have a printer connected to your personal computer or other device or, alternatively, the ability to save a copy through use of printing service or software such as Adobe Acrobat®.

Withdrawal of Electronic Acceptance of Disclosures and Notices

You can also contact us to withdraw your consent to receive any future communications electronically, including if the system requirements described above change and you no longer possess the required system. If you withdraw your consent, we will terminate your use of the National Center for Safety Initiatives, LLC (NCSI) website and the services provided through the National Center for Safety Initiatives, LLC (NCSI) website.

To ensure that a signature is unique and to safeguard you against unauthorized use of your name, your IP address 72.94.84.74 has been recorded and will be stored along with your electronic signature. Please note that if you wish to submit your Disclosure and Authorization Forms electronically, National Center for Safety Initiatives, LLC (NCSI) requires that you include your social security number or user identification. All of your information will be encrypted and transmitted via our secure website.

By typing my name below, I consent to transacting electronically, including receiving legally required notices electronically. I understand that uses computer technology to ensure that my signed documents are not altered after submission. I agree to allow to validate my signed documents in this way.

Next you will have 4 pages where you will be required to “e-sign” by typing out your full name. I am not including every page in this instruction because you get the idea, but the final signature page will require you to e-sign and type in the last 4 of your social security number.

SIGNATURE (4 OF 4)

**ACKNOWLEDGMENT AND AUTHORIZATION
FOR BACKGROUND INVESTIGATION**

I acknowledge receipt of the separate documents entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION, DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT (if applicable), A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and OTHER STATE LAW NOTICES and certify that I have read and understand those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by Delaware State Parks (the "Company") at any time after receipt of this authorization and throughout my participation or employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state, municipal or federal agency, motor vehicle records agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by National Center for Safety Initiatives, LLC (NCSI); P.O. Box 39008, Cleveland, OH 44139; 866-996-7412; <https://www.solutions.ncsisafe.com> and/or Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

I understand that by typing my name and the last four digits of my Social Security Number or User ID, and clicking on the "NEXT" button below, constitutes my electronic signature, dated as of when I click on the "NEXT" button, and that by doing so:

- I am authorizing National Center for Safety Initiatives, LLC (NCSI) to conduct the background check(s) described above
- I am consenting to use electronic means to sign this form and have read and understand the above disclosure
- I acknowledge I may request a hard copy of this Disclosure and Authorization form after agreeing to the background check electronically by calling National Center for Safety Initiatives, LLC (NCSI) at 866-996-7412

Please note: the last four digits of your SSN or User ID may be required at a later time for verification purposes.

[End of ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK]

Please check this box to receive from NCSI: a copy of any report furnished by NCSI to the Company pursuant to your authorization.

Name:

ID/SSN (last 4):

IP Address: 72.94.84.74

Next

On the final page you can select if you would like a copy of the application to be sent to you (this does NOT include your results, those will be sent at a later time).

Finally, PLEASE LET ALLI KNOW YOU SUBMITTED. This gets sent into the larger state system and there is no way for the state employee to know which site applications are from. You will get a copy of your results, but on our end we only get confirmation of pass/fail, not additional details.

Any questions or issues, email education@auburnheights.org