INSTRUCTIONS FOR COMPLETING A CERTIFICATE OF EMPLOYABILITY APPLICATION

ELIGIBILITY

This application is for individuals who have been convicted of a crime *and* are a current resident of the State of Connecticut. The following rules apply:

- If you are currently incarcerated you do not qualify.
- If you are currently under supervision by the Department of Correction's Parole and Community Services Division and have successfully completed 90 days of supervision.
- If you have successfully completed your sentence, are not currently under supervision, have no new arrest(s) and have been in the community for a minimum of 90 days.

A Certificate of Employability is for employment and licensure purposes only. This does not erase your criminal history. You can only apply for a Certificate of Employability with the Board of Pardons and Paroles (BOPP) if you meet the above criteria.

HOW TO PREPARE AND SUBMIT THIS CERTIFICATE OF EMPLOYABILITY APPLICATION

1. You can fill the form on line and print. If you cannot type your application responses, please print legibly. Responses that are not legible (able to be read) may delay a decision on your application or result in your application being denied.

2. Please use binder or paper clips to keep the pages of your application together when you submit your application. **DO NOT staple or place your application in bound folders**. Please make sure that each document that you include in your application has your name and date of birth on it, and make sure that your application is in the following order:

   a. The Application with page 5 notarized.
   b. A Photocopy of your driver's license or State I.D.
   c. Any other documentation or paperwork that you wish to include for the BOPP to consider (certificates, diplomas, resumes, evaluations, etc.).
   d. Supervising Officer Questionnaire

3. You are expected to answer all questions on this application truthfully. The BOPP will be doing a thorough criminal background check on every person who applies for a BOPP-issued Certificate of Employability, and will talk to your Parole Officer. Please note that lying or leaving out any information asked for on this application can be grounds to deny your application.

4. Mail your application and any other documents or paperwork that you want the Board of Pardons and Paroles to consider to:

   Board of Pardons and Paroles
   Attn: Pardons Unit
   55 West Main Street, Suite 520
   Waterbury, CT 06702

Applications will be reviewed in the order that they are delivered to the Board of Pardons. NO APPLICATIONS WILL BE ACCEPTED IN PERSON. It is highly recommended that you make a copy of all of the documents and paperwork that you mail to the Board of Pardons and Paroles to keep for your personal records because the Board of Pardons will not return any documents or paperwork that it receives. It is also highly recommended that you send your application by certified mail. The BOPP is not responsible for applications that are lost if they are not sent by certified mail. If you have any questions or need any help completing your application, please call the BOPP office at 203-805-6643 or talk to your Supervising/Parole Officer.

STATE OF CONNECTICUT

BOARD OF PARDONS AND PAROLES
55 West Main Street - Waterbury, CT 06702

Application for Certificate of Employability

Section 1: Applicant Information

Last name	First name	Middle name

Date of birth	Social security number	Place of birth	Gender

Address *(Number and street)*	Apartment number/floor	City	State	Zip code

Home phone number	Business phone number	Cell phone number	E-mail address

Section 2: Family Information

Please list all members of your household *(anyone who lives with you)* below:

Name	Age	Relationship to you
1.		
2.		
3.		
4.		
5.		

How long have you lived at your current address?_____

Current marital status ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widow ☐ Widower ☐ Civil union

Current spouse/partner's name: _____

Section 3: Alias and Other Names

State, in full, every other name by which you have been known, including the reason for your use of another name, and the dates during which you were so known *(for example, include your maiden name, name by a former marriage, aliases, and nicknames)*.

1._____

2._____

3._____

Section 4: Previous Application History

Have you applied for a Certificate of Employability or Provisional Pardon in the past? ☐ Yes ☐ No

If yes, please state the month(s) and year(s) you applied:_____

Section 5: Citizenship Information

Are you a citizen of the United States of America? ☐ Yes ☐ No

If you answered no, country of citizenship:_____

Section 6: Education Background/Special Training

Please check the highest grade you finished:

☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8 ☐9 ☐10 ☐11 ☐12 ☐13 ☐14 ☐15 ☐16 ☐17 ☐18 ☐19 ☐20 ☐21 ☐22 ☐23 ☐24

Please list any education or other special training you have gotten or are currently getting. Include the school name, dates that you went there, degrees that you earned, and any honors that you got. If you went to training, list the type of training and the agency that provided the training**. You should attach a copy of any certificates, diplomas, or transcripts that you got to this application.**

_____

_____

_____

_____

Section 7: Employment History

Are you currently employed? Yes ☐ No ☐
If YES, please provide the following information:

Date (month & year) Occupation/Position Employer Name/Address/Phone # Supervisor

_____ _____ _____ _____

If NO,
Have you applied for jobs while on supervision? Yes ☐ No ☐
Have you been denied a position? Yes ☐ No ☐

Reason: _____

List your jobs and employers for the last 5 years or since you left school, whichever period is less. Do not leave out or skip any jobs. Start with the job that you have now or your most recent job and work back.

Dates *(month & year)*	Job/position	Employer name/address/phone number	Supervisor
1.			
2.			
3.			
4.			
5.			
6.			

Licenses/certifications held

Type of license	Licensing agency	License number	Date issued	Expires
1.				
2.				
3.				

Section 8: Military History

Where you ever in any branch of the U.S. Armed Forces? ☐ Yes ☐ No
If yes, please answer below:

Branch of service	Date of entry into active duty	Date of discharge

Did you serve in the National Guard? ☐ Yes ☐ No

Type of discharge	Rank at discharge

Attach a copy of your separation papers (Form DD-214) or your military ID (DD Form 2) if you are currently active.

Section 9: Criminal History

Conviction Record - You must list all of your convictions, including convictions in Connecticut and in any other state and federal convictions. Any willful omission *(leaving anything out on purpose)* will be construed as a false statement *(lying)* and might cause your application to be denied.

Dates	Court and location	Charge	Sentence

If you would like to get an official criminal history record to help you in filling out this section of the application, you can get one from the Connecticut State Police for a fee of $50 and attach it to this application.
http://www.ct.gov/despp/lib/despp/reports_and_records/ dps-846-c.pdf

Section 10: Victim Information

Please list the name(s) and approximate age of any victim(s) of your crime(s) and their phone number(s) or address(es) if you know this information. DO NOT try to get in touch with any victim. If there was no victim to your crime(s) please write "No victim", if you do not know the victim please write "Victim information unknown". The Board will still review your application if you do not know the information about any victims of your crime(s).

Section 11: Purpose of Application

State your reason(s) for applying for a Certificate of Employability ☐Employment ☐Licensure (Barber, HVAC, etc)

In your own words, how have you changed since your criminal activity? You may also use this section to tell the Board about anything else that you would like it to think about as part of your application. Attach additional sheet(s) if necessary.

Section 12: Optional Continuation Page

Please use this section to complete any information that you could not fit on the application

Please Number The Section That You Are Continuing

Section number

Response

Section number

Response

Section number

Response

Section number

Response

Section number

Response

Section 13: Attestation and Background Investigation Authorization

I, _____, agree to allow an investigation to be made to determine my fitness for a Certificate of Employability pursuant to No. 14-27 of the 2014 Public Acts. I hereby state, under penalty of false statement, that I have, to the best of my ability, fully and truthfully answered all of the questions in this application.

Applicant's signature	Date

I, , have applied to the State of Connecticut Board of Pardons and Paroles for a Certificate of Employability. To facilitate the investigation of my application, I hereby authorize any individual, private business concern, state or federal agency to release any information such person, private business concern, state or federal agency may have in its possession concerning me or my activities.

Applicant's signature	Date

Subscribed and Sworn before me this _____day of _____, 20

Signature of Notary Public	Notary seal
My commission expires on_____	

Statistical and Research Information Sheet

This section is optional and will be used for research and statistical purposes only

This section will not be given to any Board members

Full name	Phone number	Email address

Address

Race/Ethnic Data

☐ **BLACK** (not of Hispanic Origin); Person having origins in any of the Black racial groups of Africa.

☐ **HISPANIC**: Persons of Mexican, Puerto Rican, Central or South America or other Spanish culture or origin, regardless of race

☐ **WHITE**: (not of Hispanic Origin): Person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

☐ **AMERICAN INDIAN OR ALASKAN NATIVE**: Persons having origin in any of the original peoples of North America who maintain cultural identification through trial affiliation or community recognition

☐ **ASIAN OR PACIFIC ISLANDER**: Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa

☐ **OTHER**: (Please specify) - _____

Future studies

May we contact you in the future for research purposes? ☐ Yes ☐ No

STATE OF CONNECTICUT

BOARD OF PARDONS AND PAROLES

55 West Main Street - Waterbury, CT 06702 – (203) 805-6643

Supervising Officer Questionnaire

Your current parole or probation officer must complete this form if you are applying for a Certificate of Employability and are currently on parole or any form of Department of Correction community supervision. A Certificate of Employability can relieve an offender of one or more barriers or forfeitures to employment or the issuance of a license. It **does not** commute or erase a criminal conviction and is not applicable to employment with a law enforcement agency or to retain or be eligible for public office.

Petitioner's Name:	
Petitioner's Date of Birth:	

Supervising Parole / Probation Officer's Name:		
Parole of Probation Office Assigned to:		
BUSINESS PHONE NUMBER:	EXTENSION:	EMAIL ADDRESS:

1. How long have you supervised the petitioner in the community and how often do you see the petitioner a month?
2. Please describe the petitioner's adjustment in the community (misconduct reports /technical violations / treatment programs participated in / random urinalysis results etc.)?
3. What is the petitioner's current employment status?
4. Is there any other information concerning the petitioner that the panel should consider?

You may attach additional pages or a letter to this form if you need more space.

By signing this form, you understand and agree that an employee of the Board of Pardons and Paroles will contact you to verify the information on this form is correct.

_____ _____

Signature of Supervising Parole Officer **Date**

Please fax this form to the Pardons Unit at (203) 805-6630. You may also mail this form directly to the address above.