



ADDENDUM TO DECLARATION FOR FEDERAL EMPLOYMENT (OF 306)

Indian Health Service

CHILD CARE & INDIAN CHILD CARE WORKER POSITIONS

OMB Approved
Form No. 0917-0028
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ITEM 16. AGENCY SPECIFIC QUESTIONS

Form with fields: NAME (Please print), SOCIAL SECURITY NUMBER, JOB TITLE IN ANNOUNCEMENT, ANNOUNCEMENT NUMBER

Section 231 of the Crime Control Act of 1990, Public Law (Pub. L.) 101-647, requires employment applications for individuals seeking employment in a position involved with the provision to children under the age of 18 of "child care services," as defined in 42 U.S.C. § 13041(a)(2), contain a question asking whether the individual has ever been arrested for or charged with a crime involving a child and for the disposition of the arrest or charge.

Section 408 of the Indian Child Protection and Family Violence Prevention Act, Pub. L. 101-630, contains a related requirement for positions in the Department of Health and Human Services that involve regular contact with or control over Indian children. The agency must ensure that persons hired for these positions have not been found guilty of or pleaded nolo contendere or guilty to certain crimes.

To assure compliance with the above laws, the following questions are added to the Declaration for Federal Employment:

- 1. Have you ever been arrested for or charged with a crime involving a child? YES NO
If "YES", provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name and address of the police department or court involved.
2. Have you ever been found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felonious or misdemeanor offense under Federal, State, or tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact or prostitution; or crimes against persons; or offenses committed against children? YES NO
If "YES", provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name address of the police department or court involved.

I certify that (1) my response to these questions is made under penalty of perjury, which is punishable by fine under title 18 of the U.S. Code, or imprisonment of not more than five years, or both; and (2) I have received notice that a criminal check will be conducted. I understand my right to obtain a copy of any criminal history report made available to the Indian Health Service and my right to challenge the accuracy and completeness of any information contained in the report.

Form with fields: APPLICANT'S SIGNATURE (sign in ink), DATE (mm/dd/yyyy)

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