

EMPLOYMENT APPLICATION

Equal Opportunity Employer

GENERAL

LAST NAME	FIRST NAME	MIDDLE INITIAL	TELEPHONE (Area Code)
OTHER NAMES USED			
PRESENT ADDRESS (Street & No.)		CITY	STATE ZIP CODE
ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU AT LEAST 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NOT, DO YOU HAVE A WORK PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO
HOW WERE YOU REFERRED TO BOYS & GIRLS CLUBS OF AMERICA (BGCA)?			
PREVIOUS EMPLOYMENT WITH BGCA (If yes, give dates, position, location)			
<input type="checkbox"/> YES _____ <input type="checkbox"/> NO			
RELATIVES EMPLOYED BY BGCA (If yes, give dates, positions)			
<input type="checkbox"/> YES _____ <input type="checkbox"/> NO			
HAVE YOU BEEN CONVICTED OF, PLEAD GUILTY TO, AND/OR PLED <i>NOLO CONTENDRE</i> TO A CRIME (FELONY OR MISDEMEANOR, INCLUDING BUT NOT LIMITED TO SEXUAL OFFENDER CRIMES, THEFT, BANKING FRAUD, DRUG AND/OR ALCOHOL-RELATED OFFENSES, ASSAULT, ETC.)? If yes, please explain (state, date, court, type of crime, place of occurrence, disposition): <input type="checkbox"/> YES _____ <input type="checkbox"/> NO			
<i>Note: Conviction of a crime will not necessarily disqualify you for employment. Each conviction will be judged on its own merit with respect to time and job relatedness.</i>			

POSITION APPLIED FOR

TITLE OR CATEGORY	SALARY REQUIREMENTS
DATE AVAILABLE	WILLINGNESS TO TRAVEL? (Approximate percentage if position indicates)

EDUCATION

SCHOOL	NAME AND LOCATION	MAJOR	GRADUATE		DEGREE
			YES	NO	
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
OTHER SCHOOLS (Graduate, Technical, Business, Military, etc.)					

CERTIFICATIONS/LICENSES

Please list any certifications or licenses you currently have. (CPR, First-Aid, Food Handlers, etc.)

WORK EXPERIENCE

Start with current or last employer first. Do not detail duties and responsibilities if described in attached resume.

COMPANY NAME		YOUR TITLE	
COMPANY ADDRESS (Street & No.)	CITY	STATE	ZIP CODE
START DATE	END DATE	STARTING SALARY	LAST SALARY
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES			
REASON FOR LEAVING			

COMPANY NAME		YOUR TITLE	
COMPANY ADDRESS (Street & No.)	CITY	STATE	ZIP CODE
START DATE	END DATE	STARTING SALARY	LAST SALARY
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES			
REASON FOR LEAVING			

COMPANY NAME		YOUR TITLE	
COMPANY ADDRESS (Street & No.)	CITY	STATE	ZIP CODE
START DATE	END DATE	STARTING SALARY	LAST SALARY
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES			
REASON FOR LEAVING			

REFERENCES

Please list 3 references: 2 professional and 1 personal

NAME	TELEPHONE	RELATION	YEARS KNOWN
NAME	TELEPHONE	RELATION	YEARS KNOWN
NAME	TELEPHONE	RELATION	YEARS KNOWN



AUTHORIZATION TO RELEASE EMPLOYMENT REFERENCE INFORMATION

I understand that Boys & Girls Clubs of Mason Valley will attempt to verify statements made on my application and made during my employment interview. I hereby give my permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of BGCMV review of this application and my candidacy for employment, I release BGCMV and all former employers from any liability as a result of the furnishing and receiving of this reference information. I understand that my failure to sign this reference release so BGCMV can contact references and make a full background check of my previous work history will be deemed interference with and a withdrawal of my application for employment.

Place your initials in the appropriate space to indicate and document your consent to this authorization.

YES _____ NO _____

JOB APPLICANT AGREEMENT

I understand that Boys & Girls Clubs of Mason Valley (BGCMV) requires certain information about me to evaluate my qualifications for employment and conduct its business if I become an employee. I understand that false, incomplete, or misleading statements on this application may be considered sufficient cause for rejection of my application and for dismissal, if discovered after I am employed by BGCMV. The use of this application blank does not indicate there are positions open and does not in any way obligate BGCMV.

I also authorize BGCMV to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having a legal and proper interest, and I hereby release BGCMV from any and all liability for its providing this information. I understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of this investigation.

In consideration of my potential employment, I agree to conform to the rules of BGCMV. I understand that I have the right to terminate my employment at any time with or without notice, with or without cause, and that BGCMV has a similar right. I understand my employment by BGCMV does not constitute a guarantee that any position be continued for any length of time or that any job assignment or shift be permanent. I understand that I may be required to work scheduled and unscheduled overtime and scheduled weekend and holiday work when required by BGCMV. I also understand that BGCMV has the right to modify its policies without giving me any notice of the changes. No promises regarding employment have been made to me. I understand that no one other than the President of BGCMV has authority to make any other agreement.

The Immigration Reform and Control Act of 1986 require that, after employment, employers verify the legal work authorization and identity of all new employees. An offer of employment will depend upon BGCMV ability to verify this necessary information.

Applications will not be considered active after the position is filled. I understand that BGCMV will attempt to verify statements made on my application and made during my employment interview.

Signature: _____ Date: _____

EQUAL OPPORTUNITY EMPLOYER:

Qualified applicants receive consideration for employment without discrimination because of age, sex, religion, marital status, race, color, creed, national origin, or disability.



BACKGROUND VERIFICATION AUTHORIZATION

PLEASE COMPLETE THE SECTION BELOW AND SIGN & DATE

NAME (please print): _____
(Last) (First) (Middle)

Address: _____

Maiden or Alias Names: _____

Date of Birth: ____/____/____ **Social Security Number:** ____-____-____

PLEASE NOTE: The above information is required for identification purposes only and in no manner used as qualifications for employment.

PLEASE LIST ADDRESSES AND DATES FOR THE PAST 7 YEARS:

Current _____

Previous _____

Previous _____

Previous _____

Previous _____

I hereby authorize Boys & Girls Clubs of Mason Valley to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment.

I release Boys & Girls Clubs of Mason Valley and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regard to the information obtained from any and all of the above referenced sources.

I understand that any offer of employment is contingent on a satisfactory background investigation. I also understand that this form will not be kept in my permanent file if I am employed. I certify that the following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge.

SIGNATURE: _____ **DATE:** _____