



APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, disability, marital or veteran status, any other legally protected status.

Position Applied For:

- Program Staff
- Front Desk Staff
- Athletics/Coaching
- Tutor- Academic Enrichment Staff
- Other

APPLICANT INFORMATION:

First Name:

Last Name:

Email:

Phone Number:

Are you at least 16 years of age or older? Yes No

Are you legally eligible to work in the United States? Yes No

Have you ever been a member of any Boys & Girls Clubs or a sports participant? Yes No

If yes, please provide date(s) & location:

Have you ever filed an application with any Boys & Girls Clubs before? Yes No

If yes, please provide date(s) & location:

Have you ever been employed or volunteered for any Boys & Girls Clubs? Yes No

If yes, please provide date(s) & location:

Have any of your friends or relatives previously worked or currently work at any Boys & Girls Clubs? Yes No

If yes, please provide their name(s) & locations:

Were you referred to apply by a current Boys & Girls Clubs employee? Yes No

If yes, please provide employee name:

AVAILABILITY:

Note: Operating Hours:

Fall, Winter, Spring = 10:00 a.m. to 7:00 p.m. and summer hours = 6:30 a.m. to 5:30 p.m.

I am looking to work (check all that apply):

- Spring
- Summer
- Fall
- Winter

Do you have reliable transportation to get to/from work? Yes No

Please update the times you are available to work. Please put n/a for days you are unavailable.

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

EDUCATION:

Please provide name & City of School, Course of Study, Years Completed, and if a Diploma/Degree was acquired. Indicate "n/a" if any of the questions do not apply to you.

High School:

Undergraduate College:

Graduate College:

Other (specify):

Work Experience:

Start with your present or last job. Please include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Work Experience 1:

Employer, Address, and Phone Number

Your Job Title:

Reason for leaving:

Type of Work Performed:

Dates Employed:

Start Date:

End Date:

Previous Supervisor:

Supervisor's Email:

Supervisor's Phone:

Work Experience 2:

Employer, Address, and Phone Number

Your Job Title:

Reason for leaving:

Type of Work Performed:

Dates Employed:

Start Date:

End Date:

Previous Supervisor:

Supervisor's Email:

Supervisor's Phone:

Work Experience 3:

Employer, Address, and Phone Number

Your Job Title:

Reason for leaving:

Type of Work Performed:

Dates Employed:

Start Date:

End Date:

Previous Supervisor:

Supervisor's Email:

Supervisor's Phone:

VOLUNTEER EXPERIENCE:

Please list organizations and activities you volunteered with/for:

ADDITIONAL SKILLS:

Please describe any job-related training, skills and extracurricular activities:

PERSONAL/PROFESSIONAL REFERENCES: Do not include family members or past supervisors.

	Name	Phone Number	Email Address	Occupation
Reference 1				
Reference 2				
Reference 3				
Reference 4				

APPLICANT STATEMENT

I certify that answers given herein are true and complete.

I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time, with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized representative of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature:

Date of Submission:

Applicant’s Electronic Signature_____

mm/dd/yyyy