

Application for Employment
(An Equal Opportunity employer)

Application Date: _____



Personal Information

Name: _____ Social Security Number: _____
Last First Middle

Present Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____

Employment Desired

Position: _____ Date you can start: _____ Salary Desired: _____

Are you employed now? Yes No If so, may we contact your present employer? Yes No

Ever applied to this organization before? Yes No Where? _____ When? _____

Referred by: _____

Education (include high school, vocational, military and any other)

Educational Level	Name & Location of School	Did you graduate?	Course of Study
High School			
College			
Other			

Will you attend any school this year? Yes No School/Program: _____

Subjects of special study or research work: _____

Volunteer Experiences: _____

Have you ever been convicted of a felony, misdemeanor or any other offense including municipal violations (other than a minor traffic violation)? Yes No

If yes, Misdemeanor Felony Other. Employment may be refused or terminated only if a conviction substantially relates to the job.

Have you ever been involuntarily discharged from a job? Yes No

If yes explain, providing the reason, dates, and employers name. _____

References (Give the names of three persons not related to you, whom you have known at least one year)

Name	Address	Relationship	Years Acquainted	Phone
1.				
2.				
3.				

Experience (List current first)			
From (Month/Year) _____	Employer	Dept/Unit	Phone
To (Month/Year) _____	Address	City/State/Zip	
Final Rate: \$ _____	Your Position & Title	Hours Per Week	Shift(s)
	Duties		Supervisor
	Reason for Leaving		
From (Month/Year) _____	Employer	Dept/Unit	Phone
To (Month/Year) _____	Address	City/State/Zip	
Final Rate: \$ _____	Your Position & Title	Hours Per Week	Shift(s)
	Duties		Supervisor
	Reason for Leaving		
From (Month/Year) _____	Employer	Dept/Unit	Phone
To (Month/Year) _____	Address	City/State/Zip	
Final Rate: \$ _____	Your Position & Title	Hours Per Week	Shift(s)
	Duties		Supervisor
	Reason for Leaving		

Are you a US Citizen or alien who has a legal right to work in the position for which you are applying? Yes No

Are you 18 years or older? Yes No

Are you able to safely perform the essential functions of the position for which you are applying with or without reasonable accommodations? Yes No

Describe accommodations required: _____

- I certify that information included in this application is true, correct, and complete without misrepresentations or omissions of any kind. I understand that if the information on this application form is discovered to be false, incorrect, or misleading, or if there are any misrepresentations or omissions of any kind, then it is just cause for rejection of this application or dismissal from employment and the Club shall not be liable in any respect.
- I hereby grant permission to the Club to investigate any information included in this application. I agree to cooperate in such investigation and release from all liability or responsibility all persons, organizations, companies, corporations, and schools collecting and supplying such information together with any other information they may have regarding me whether or not it is in their records.
- I understand that, if I am employed by the Club, any such employment is not binding on either party for any specified period of time. I further understand that no representative of the Club, other than the Executive Director, has any authority to enter into any agreement for employment for any specified period of time, and such agreement must be in writing signed by the Executive Director.
- I understand that if I am employed, I will be an employee at will.

Date: _____ Signature: _____



BOYS & GIRLS CLUB
OF FOND DU LAC

Boys & Girls Club
Employment Application

Criminal Background Check

This organization conducts a criminal records inquiry on all employees and volunteers.

By my signature, I hereby authorize the Boys & Girls Club of Fond du Lac to conduct a criminal background check through the Department of Justice or any other governmental agency as a condition of employment.

Print Name

Social Security Number

Date of Birth

Other Name

Driver's License Number

Signature of Applicant

Date