

## APPLICATION FOR EMPLOYMENT

(PLEASE TYPE OR PRINT)

POSITION(S) APPLYING FOR:	AND/OR
AGE GROUP OF YOUTH TO WORK WITH (check all that apply):   6-11  12-1	4 🗆 15-18
NAME:AVAILABILITY:	
ADDRESS:	
TELEPHONE: E-MAIL:	
PERSON TO CONTACT IN CASE OF EMERGENCY:	
PHONE #:RELATIONSHIP:	
Can you demonstrate that you are a U.S. citizen or that you are legally authorized to work in the	
United States? ☐ Yes ☐ No Are you over 18 years of age? ☐ Yes ☐ No	
Have you ever been convicted of a crime? (Exclude those cases contained within an expunged juvenile	record and
minor traffic violations.) $\square$ Yes $\square$ No If so, please explain (Conviction does no	t necessarily
disqualify you from further consideration for employment):	
Effort will be made to reasonably accommodate all disabilities. Are you aware of any disabilities which	ch might
interfere with your performance of the essential duties for which you are applying?   Yes	No
If yes, please explain	
Do you have a current CPR/First Aid card?□ Yes □ No	
If no, would you be willing to obtain one? □ Yes □ No	
Do you have a High School Diploma or a General Education Diploma (GED)?   Yes   No	)
EDUCATION	
SCHOOLS ATTENDED AFTER HIGH SCHOOL:	
Name and Location Field of study Hours completed Certificates or degrees Date	es
List any special training, certificates, professional or vocational licenses, computer skills (list programs skills, languages, or other special skills you have that are pertinent to the position for which you are a	•

## EMPLOYMENT HISTORY

		experience during the past five years,
luding all non-paid or volunte	er work:	
➤ EMPLOYER	Address:	Dates From/ To
Your Job Title:	Supervisor's Name/ Title:	
Specific Duties: ☐ Part-time	☐ Full-time	
Reason for leaving:		
May we contact for a reference	ee?  Yes  No If yes, current P	hone #
➤ EMPLOYER	Address:	Dates From/ To
Your Job Title:	Supervisor's Name	e/ Title:
Specific Duties: ☐ Part-tin	ne 🗆 Full-time	
Reason for leaving:		
Reason for leaving: May we contact for a referenc		
Reason for leaving:	e?  Yes  No If yes, current Ph Address:  Supervisor's Name	Dates From/ To:
Reason for leaving:  May we contact for a referenc  EMPLOYER  Your Job Title:	e?  Yes  No If yes, current Ph Address:  Supervisor's Name	
Reason for leaving:  May we contact for a referenc  EMPLOYER  Your Job Title:	e?  Yes  No If yes, current Ph Address:  Supervisor's Name	none #  Dates From/ To:  e/ Title:

## **VOLUNTEER EXPERIENCE**

## Additional experience (volunteer, special training, etc.) that you have not yet listed

> BUSINESS NAME	Address:	Dates From/ To:	
Your Position:	Supervisor's Name/ Title:		
Specific Duties: ☐ Part-time			
May we contact for a reference	ee?  Yes  No If yes, current Pho	one #	
AΓ	DITIONAL PERSONAL REFER	RENCES	
Name:	Phon	ne Number:	
In what capacity do you know this pers	on:		
For how long have you known this pers	son:		
Name:	Phor	ne Number:	
In what capacity do you know this pers			
For how long have you known this pers	son:		
Name:	Phon	ne Number:	
In what capacity do you know this pers	on:		
For how long have you known this pers	son:		
Club of Corvallis, to make any necessary submit to a criminal background check. I hire" is contingent upon the conditions set	I belief. I understand that misrepresentation plication and/or dismissal from employme and appropriate investigations to verify the have read this form in full and understand forth herein.	on or omission of facts called for in this ont. I authorize the employer, Boys & Girls e information stated above, and I fully d the above statements and that an "offer to	
Signature of Applicant		Date	