

NAME

LAST

FIRST

M.I.

DATE

EMPLOYMENT APPLICATION FORM



BOYS & GIRLS CLUBS
OF AMARILLO

Equal Opportunity Employer

Boys & Girls Clubs of Amarillo ("BGCA") is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, or other protected status.

INSTRUCTIONS: Please print and answer all questions accurately and completely. Print "N/A" in any space that does not apply to you.

Incomplete applications or applications providing additional non-requested information are considered withdrawn and will not be considered.

GENERAL		
NAME (Last)	(First)	(Middle Initial)
TELEPHONE:	CELL PHONE:	E-MAIL:
OTHER NAMES USED		
PRESENT ADDRESS		
ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? YES <input type="checkbox"/>	ARE YOU AT LEAST 18 YEARS OF AGE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF NOT, DO YOU HAVE A WORK PERMIT? YES <input type="checkbox"/> NO <input type="checkbox"/>	
HOW WERE YOU REFERRED TO BOYS & GIRLS CLUBS OF AMARILLO (BGCA)?		
PREVIOUS EMPLOYMENT WITH BGCA (If any, give dates, position, location)		
RELATIVES EMPLOYED BY BGCA (If any, give dates, positions)		
<p>HAVE YOU BEEN CONVICTED OF, PLEAD GUILTY TO, AND/OR PLED NOLO CONTENDERE 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.)? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>ARE YOU CURRENTLY AWAITING TRIAL, SENTENCING OR OTHER DISPOSITION OF A CRIMINAL CHARGE? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If the answer to either question is yes, please explain (state, date, court, type of crime, place of occurrence, disposition):</p>		
<p>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.</p>		
<p>HAVE YOU EVER BEEN DISCHARGED OR REQUESTED TO RESIGN FROM A POSITION? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If so, explain:</p>		

POSITION APPLIED FOR

TITLE	SALARY REQUIREMENTS (minimum or range)
DATE AVAILABLE TO BEGIN WORK	WILLINGNESS TO TRAVEL? (Approximate percentage if position indicates)

EDUCATION

SCHOOL	NAME and LOCATION	MAJOR	GRADUATE		DEGREE RECEIVED
			YES	NO	
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
OTHER SCHOOLS (Graduate, technical, business, military, etc.)					

Professional Licenses: _____

List computer or technical skills: _____

WORK EXPERIENCE

Please complete all information, beginning with your current or most recent employer,
Attach additional sheets if necessary. Include periods of unemployment, self-employment and military service.

COMPANY NAME		YOUR TITLE			
COMPANY ADDRESS (Street & No.)		(City)	(State)	(Zip)	
START DATE	END DATE	STARTING BASE SALARY	LAST BASE SALARY	BONUS OPPORTUNITY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, AMOUNT:	
SUPERVISORS NAME	SUPERVISORS TITLE	TELEPHONE		MAY WE CONTACT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES					
REASON FOR LEAVING					

COMPANY NAME		YOUR TITLE		
COMPANY ADDRESS (Street & No.)		(City)	(State)	(Zip)
START DATE	END DATE	STARTING BASE SALARY	LAST BASE SALARY	BONUS OPPORTUNITY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, AMOUNT:
SUPERVISORS NAME	SUPERVISORS TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES				
REASON FOR LEAVING				
COMPANY NAME		YOUR TITLE		
COMPANY ADDRESS (Street & No.)		(City)	(State)	(Zip)
START DATE	END DATE	STARTING BASE SALARY	LAST BASE SALARY	BONUS OPPORTUNITY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, AMOUNT:
SUPERVISORS NAME	SUPERVISORS TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	
BRIEF DESCRIPTION OF DUTIES & RESPONSIBILITIES				
REASON FOR LEAVING				

Can you perform this job (as detailed verbally or in the job description) with or without reasonable accommodation?

PERSONAL REFERENCES

1.	NAME:	RELATIONSHIP:
	ADDRESS:	PHONE #:
	E-MAIL ADDRESS:	
2.	NAME:	RELATIONSHIP:
	ADDRESS:	PHONE #:
	E-MAIL ADDRESS:	
3.	NAME:	RELATIONSHIP:
	ADDRESS:	PHONE #:
	E-MAIL ADDRESS:	

IN AN EFFORT TO MAINTAIN CONFIDENTIALITY, THIS PORTION OF THE APPLICATION MAY NOT BE DUPLICATED

1. Do you use illegal drugs? **YES** **NO**
2. Have you ever been charged with child neglect or abuse? **YES** **NO**
3. Have you ever been convicted of any crimes against children? **YES** **NO**
4. Have you ever been convicted of offenses related to obscenity, pornography, or crimes involving minors? **YES** **NO**
5. Have you ever been convicted of a criminal offense? **YES** **NO**
6. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children? **YES** **NO**
7. Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor, including, but not limited to, a domestic order of protection? **YES** **NO**
8. Other than the previous; is there any fact or circumstances involving you or your background that would call into question you being entrusted with the supervision, guidance, and care of young people? **YES** **NO**
9. Explain any 'YES' answers in full (use a separate sheet of paper if necessary).

I authorize BOYS & GIRLS CLUBS OF AMARILLO (BGCA) to investigate all statements in this application and to secure any necessary information from all my employers, references and academic institutions. I hereby release all those employers, my employment history, my academic credentials or qualifications, and my suitability for employment with BGCA. I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references.

I further understand that any false or misleading statements will be sufficient cause for rejection of my application if BGCA has not employed me or immediate dismissal if BGCA has employed me. I also authorize BGCA 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 BGCA from any and all liability for its providing this information.

I understand that nothing in this employment application in BGCA's policy statements or personnel guidelines, or in my communications with my BGCA official is intended to create an employment contract between BGCA and me. I also understand that BGCA 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 if an employment relationship is established, I have the right to terminate my employment at any time for any reason. I also understand that BGCA retains the right to terminate my employment at any time for any reason.

I hereby acknowledge that I have read and understand the preceding statements.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____