



BOYS & GIRLS CLUBS
of Northeast Alabama, Inc.

Boys & Girls Clubs of Northeast Alabama

Post Office Box 22
Gadsden, Alabama 35902
Phone (256) 546-KIDS
Fax (256) 546-5556

EMPLOYMENT APPLICATION

DATE GIVEN: _____ DATE RETURNED: _____
DATE OF HIRE: _____ POSITION: _____
PAY RATE: _____ TERMINATION DATE: _____ REASON: _____

The Boys & Girls Club of Northeast Alabama, Inc has been part of a nationwide and local effort to help assure the protection o children from abuse and exploitation. Therefore, in order to safeguard the well-being of the youth served, the Boys & Girls Clubs of Northeast Alabama, Inc. will investigate the accuracy of data provided in the application process for all applicants before appointment to the staff can be made This investigation may include, but is not limited to, reference checking with past employers, the military, schools, appropriate volunteer agencies, police and other governmental agencies. Polygraph and fingerprinting may be used when necessary to verify particular circumstances. Prior to or during employment, a drug screening may be required and asked for at random

POSITION BEING APPLIED FOR _____

CATEGORY: PAID FULL TIME _____ PAID PART TIME _____ CONTRACT _____ VOLUNTEER _____

SALARY REQUIRED: _____ PER _____ DATE AVAILABLE FOR EMPLOYMENT: _____

IF PART TIME OR VOLUNTEER, DAYS & TIME AVAILABLE _____

NAME: _____ SS#: _____

ALL OTHER NAMES BY WHICH KNOWN AT ANY OTHER TIME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: _____

PREVIOUS ADDRESS (past 10 years) & NAME BY WHICH KNOWN AT EACH ADDRESS: _____

HAVE YOU EVER BEEN TERMINATED INVOLUNTARILY FROM A PAID OR VOLUNTEER POSITION OR SUSPENDED FROM AND EDUCATIONAL INSTITUTION? YES NO If yes, please explain: _____

U. S. Citizen? Yes No If not, Visa Type? _____

How or by whom were *you* referred to the Boys & Girls Club? _____

Have you ever been bonded? Yes No If yes, with what employer: _____

Military Service? Yes No If yes, what branch? _____

Discharge Voluntary Involuntary Number _____

It discharge was involuntary, why? _____

CLERICAL APPLICANTS FILL OUT THE FOLLOWING:

Type? _____ Words/minute? _____ Dictation? _____ Words/Minute? _____

Office machines *you* can operate: _____

Experience in what computer software programs? _____

EDUCATIONAL HISTORY:

HIGH SCHOOL ATTENDED: _____ CITY _____

YEAR GRADUATED _____ WILL GRADUATE _____

COLLEGE/TECHNICAL SCHOOL ATTENDED _____ CITY _____

YEAR GRADUATED: _____ DEGREE: _____

IF NOT GRADUATED, NUMBER OF YEARS ATTENDED _____

COLLEGE/TECHNICAL SCHOOL ATTENDED: _____ CITY _____

YEAR GRADUATED: _____ DEGREE: _____

IF NOT GRADUATED, NUMBER OF YEARS ATTENDED _____

ANY OTHER COLLEGE/TECHNICAL/MILITARY/TRAINING YOU FEEL IS PERTINENT TO YOUR POSSIBLE EMPLOYMENT _____

PLEASE LIST ANY PROFESSIONAL SOCIETIES, ASSOCIATIONS, AWARDS, PUBLICATIONS, AND HONORS: _____

ARE YOU OVER THE AGE OF EIGHTEEN? ___ YES ___ NO if no. hire is subject to verification that you are of minimum legal age.

DO YOU HAVE ANY PHYSICAL/MENTAL CONDITIONS WHICH MAY LIMIT YOUR ABILITY TO PERFORM WORK APPLIED FOR? PLEASE BE SPECIFIC _____

HAVE YOU EVER BEEN HOSPITALIZED/INSTITUTIONALIZED FOR A PSYCHIATRIC OR EMOTIONAL CONDITION? IF SO, PLEASE EXPLAIN GIVING DATES AND NAMING HOSPITAL/INSTITUTION: _____

HAVE YOU HAD A MAJOR ILLNESS/SURGERY IN THE PAST 5 YEARS? _____ IF YES, PLEASE EXPLAIN: _____

HAVE YOU RECEIVED COMPENSATION FOR INJURIES? _____ IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME(S)? _____ IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CRIMINALLY CHARGED WITH ANY CRIME RELATED TO THE MISTREATMENT, ABUSE OR MOLESTATION OF CHILDREN? ___ IF YES, PLEASE EXPLAIN FULLY: _____

DO YOU HAVE A VALID DRIVERS LICENSE? _____ WHAT STATE? _____

EMPLOYMENT HISTORY:

PLEASE COMPLETE THE FOLLOWING BEGINNING WITH YOUR MOST RECENT EMPLOYMENT:

NAME OF EMPLOYER _____ PHONE: _____

ADDRESS: _____

DATES OF EMPLOYMENT: _____ TO _____ NAME OF IMMEDIATE SUPERVISOR: _____

SALARY/RATE OF PAY: _____ PER _____ REASON FOR LEAVING _____

NAME OF EMPLOYER _____ PHONE: _____

ADDRESS: _____

DATES OF EMPLOYMENT: _____ TO _____ NAME OF IMMEDIATE SUPERVISOR: _____

SALARY/RATE OF PAY: _____ PER _____ REASON FOR LEAVING _____

NAME OF EMPLOYER _____ PHONE: _____

ADDRESS: _____

DATES OF EMPLOYMENT: _____ TO _____ NAME OF IMMEDIATE SUPERVISOR: _____

SALARY/RATE OF PAY: _____ PER _____ REASON FOR LEAVING _____

NAME OF EMPLOYER _____ PHONE: _____

ADDRESS: _____

DATES OF EMPLOYMENT: _____ TO _____ NAME OF IMMEDIATE SUPERVISOR: _____

SALARY/RATE OF PAY: _____ PER _____ REASON FOR LEAVING _____

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? _____ IF NOT. PLEASE INDICATE WHICH ONES YOU DO

NOT WANT US TO CONTACT AND WHY: _____

PERSONAL REFERENCES (NOT FORMER EMPLOYERS OR RELATIVES):

NAME _____ OCCUPATION _____

ADDRESS _____ PHONE _____

HOW LONG HAS THIS PERSON KNOWN YOU? _____

PERSONAL REFERENCES (NOT FORMER EMPLOYERS OR RELATIVES):

NAME _____ OCCUPATION _____

ADDRESS _____ PHONE _____

HOW LONG HAS THIS PERSON KNOWN YOU? _____

PERSONAL REFERENCES (NOT FORMER EMPLOYERS OR RELATIVES):

NAME _____ OCCUPATION _____

ADDRESS _____ PHONE _____

HOW LONG HAS THIS PERSON KNOWN YOU? _____

AFFIDAVIT

I hereby certify that the information and answers provided in this application are true and correct. I hereby authorize the Boys & Girls Club of Northeast Alabama, Inc. to investigate the accuracy of the information provided. I further authorize the companies, schools and other persons named in this application to release any information concerning my past employment and I hereby release such companies, schools and persons from any and all liability for damages resulting from the disclosure of such information. I am willing to submit to a physical examination and/or drug screening and I agree to accept the findings regarding my physical qualifications for employment. I understand that my failure or refusal to complete any part of the application process will result in my being disqualified for employment with the Boys & Girls Club of Northeast Alabama, Inc. I understand that at any time during my employment I may be required to furnish blood/urine samples to determine my suitability for continued employment. I understand and acknowledge that any error or omission on this application may result in immediate termination of my employment with the Boys & Girls Club of Northeast Alabama, Inc. I acknowledge and understand that my employment can be terminated with or without cause at any time at the option of the Boys & Girls Club of Northeast Alabama, Inc., or at my option.

Signature _____ Date _____

Please Print Name _____