

Applicants are not required to give any information on this form that is prohibited by Federal, State or Local Law.

Today's Date: _____

Name: _____

(First)

(Middle)

(Last)

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-Mail: _____

Cell phone: _____

Position Applying For: Reaching for Tomorrow Program Leader

Work Qualifications:

Do you have experience working with special needs youth? (If yes, please explain)

List any special training:

Are you bi-lingual? Yes No If yes, what languages? _____

Have you ever been a youth program leader? (please explain) _____

Educational Background:

FORMAL EDUCATION		Name & Location	Degree or Highest Level Attained	Major Subject	Minor Subject	Rank in Graduating Class—Top Third, Middle Third, or Bottom Third	Average in Major Subject—A, B+, B, C+, or C
	High School/ G.E.D.						
	College						
	Graduate School						
	Technical, Business or Other						

Were you in the U.S. Armed Forces? Yes No If yes, what branch? _____

Dates of service _____

Rank at Separation _____

Describe your duties _____

Employment Record

Have you ever been discharged or asked to resign from any job? _____ (If yes, give details on separate sheet.)

Present or most recent employer

Employed from _____ to _____ Starting salary _____ Final salary _____

Full Address _____ City/State/Zip _____

Nature of Business _____

Department last worked in _____

Supervisor's name _____ Phone _____

Position(s) held _____

Reason for leaving

May we contact your present employer? Yes No

Next most recent employer

Employed from _____ to _____ Starting salary _____ Final salary _____

Full Address _____ City/State/Zip _____

Nature of Business _____

Department last worked in _____

Supervisor's name _____ Phone _____

Position(s) held

Reason for leaving

May we contact your present employer? Yes No

Next most recent employer

Employed from _____ to _____ Starting salary _____ Final salary _____

Full Address _____ City/State/Zip _____

Nature of Business _____

Department last worked in _____

Supervisor's name _____ Phone _____

Position(s) held

Reason for leaving

May we contact your present employer? Yes No

Account for all other full-time employment for the past 5 years on an attached sheet. Provide information in the same format as above.

Describe current or past volunteer involvement.

Are you licensed to drive an automobile? Yes No Are you insurable to drive? Yes No
If no to either, do you have reliable transportation to and from meeting sites on a regular basis?
 Yes No

NOTE: Being licensed and insured to drive an automobile is not a condition of employment, however consistent attendance at meeting sites is a condition of continued employment, and transportation to and from meeting sites is the responsibility of the employee.

On what date can you begin employment? _____

How were you referred to the Learning for Life? (If by an individual, give name.)

Have you ever been convicted of a felony? Yes No (You may answer “no” if your conviction has been ordered sealed, expunged, or eradicated.)

NOTE: Conviction is not an automatic bar to employment. All of the relevant circumstances surrounding the conviction will be considered in relation to specific job requirements, including how long ago the conviction occurred and the crime involved. Please provide complete information about the conviction by attaching a separate statement.

Character References (please list three)

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

I certify that to the best of my knowledge, the information given is complete and correct, and understand that providing willfully false information shall be cause for immediate discharge.

Applicant’s Signature: _____

Date: _____