



EMPLOYMENT APPLICATION
Equal Opportunity Employer

GENERAL

NAME	(Last)	(First)	(Middle Initial)	TELEPHONE (Area Code)
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OTHER NAMES USED

PRESENT ADDRESS

ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? IF YOU ARE A RESIDENT ALIEN, PLEASE GIVE YOUR ALIEN NUMBER OR PRESENT YOUR RESIDENT ALIEN CARD. <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU AT LEAST 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF NOT, DO YOU HAVE A WORK PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO
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HOW WERE YOU REFERRED TO BOYS & GIRLS CLUBS OF RUSK COUNTY (BGCR)?

PREVIOUS EMPLOYMENT WITH BGCR (If any, give dates, position, location)

RELATIVES EMPLOYED BY BGCR (If any, give dates, positions)

HAVE YOU BEEN CONVICTED OF, PLEAD GUILTY TO, AND/OR PLED *NOLO CONTENDRE* 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.)? If yes, please explain (state, date, court, type of crime, place of occurrence, disposition):

YES _____

NO

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.

POSITION APPLIED FOR

TITLE OR CATEGORY	SALARY REQUIREMENTS
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DATE AVAILABLE	WILLINGNESS TO TRAVEL? (Approximate percentage if position indicates)
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EDUCATION

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

WORK EXPERIENCE

Start with current or last employer first. Do not detail duties and responsibilities if described in attached resume.

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

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

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

AUTHORIZATION TO RELEASE EMPLOYMENT REFERENCE INFORMATION

I understand that Boys & Girls Clubs of Rusk County (BGCRC) will attempt to verify statements made on my application and made during my employment interview. I hereby give my permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of BGCRC's review of this application and my candidacy for employment, I release BGCRC and all former employers from any liability as a result of the furnishing and receiving of this reference information. I understand that my failure to sign this reference release so BGCRC can contact references and make a full background check of my previous work history will be deemed interference with and a withdrawal of my application for employment.

_____ *Yes _____ *No (*Use your initials to document your consent to this authorization.)

Signature

Date

JOB APPLICANT AGREEMENT

I understand that Boys & Girls Clubs of Rusk County (BGCRC) requires certain information about me to evaluate my qualifications for employment and conduct its business if I become an employee. I understand that false, incomplete, or misleading statements on this application may be considered sufficient cause for rejection of my application and for dismissal, if discovered after I am employed by BGCRC. The use of this application blank does not indicate there are positions open and does not in any way obligate BGCRC.

I also authorize BGCRC 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 BGCRC from any and all liability for its providing this information. I understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of this investigation.

The Immigration Reform and Control Act of 1986 requires that, after employment, employers verify the legal work authorization and identity of all new employees. An offer of employment will depend upon BGCRC's ability to verify this necessary information.

Applications will not be considered active after the position is filled. I understand that BGCRC will attempt to verify statements made on my application and made during my employment interview.

Signature

Date

EQUAL OPPORTUNITY EMPLOYER: Qualified applicants receive consideration for employment without discrimination because of age, sex, religion, marital status, race, color, creed, national origin or disability.

DISCLOSURE TO EMPLOYMENT OF APPLICANT

PROCUREMENT FOR BACKGROUND CHECK

In connection with your application for employment, we may procure a background check on you from LexisNexis Screening Solutions as part of the process of considering your candidacy as an employee.

By your signature below, you hereby authorize us to obtain a Background Check Report about you in order to consider you for employment.

Applicants' Name: _____

Other Names used: _____

Social Security Number: _____

Address: _____ City: _____ State: _____ ZIP: _____

Date of Birth: _____ Phone: _____

Driver's License
Number: _____ DL State: _____

Name as appears
on Driver's License: _____

NOTE: Date of Birth information is used **ONLY** by LexisNexis Screening Solutions for verification of identity and is not used for any purpose by the Boys & Girls Club.

Applicant's Signature: _____ Date: _____

Once you have completed the form email to:

Peggy S. McAlister
psmcaster1@yahoo.com