



Employment Application

Returning Staff

Directions: This form is for use by applicants previously employed by BGCSC during the 2014-2015 program year. Please return completed application to the Clubhouse you are seeking employment at or bgcscnewhire@gmail.com

NAME		HOME PHONE	
CURRENT ADDRESS		PERMANENT ADDRESS	
CITY		CITY	
STATE	ZIP	STATE	ZIP
CELL PHONE		D.O.B	S.S. #
EMAIL			

NOTE: Providing the following information is strictly voluntary and confidential. It allows us to better assess our community outreach and will not be used in any manner to make decisions or judgments regarding a prospective employee.

GENDER	<input type="checkbox"/> Female	<input type="checkbox"/> Male	RACE/ETHNICITY
Have you ever been arrested?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> American Indian or Alaska Native
Have you ever been convicted of a crime?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Native Hawaiian or Pacific Islander
Are there any outstanding warrants against you?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Black or African American
Are you currently taking prescription medicine?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Hispanic or Latino
			<input type="checkbox"/> Other _____
Please list any mental or physical disability that would affect your ability to work in any capacity or special accommodations in our program: _____			

At which location are you seeking employment?

<input type="checkbox"/> Northtown Clubhouse	<input type="checkbox"/> Lisa Stiles-Gyllenhammer Clubhouse	<input type="checkbox"/> BE GREAT Clubhouse				
544 E. Providence Ave Spokane, WA 99207 (509)489-0741	12509 N. Market St. Mead, WA 99201 (509)368-9175	2900 1 st Ave Spokane, WA 99202 (509)536-8152				
AVAILABILITY Please fill in the days and times of availability to work.	NOTE: Hours of Operation:					
Available Start Date:	School Days:	3:00 – 7:00p.m.				
	Half Days:	1:00 – 6:00p.m.				
	Holidays/School Days Off	7:00a.m. – 6:00p.m.				
	Saturday NT Only:	10:00a.m – 4:00p.m.				
	Summer:	7:00a.m. – 6:00p.m.				
DAYS:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	TOTAL HOURS
TIMES:						

What area(s) of programming interest you most?

<input type="checkbox"/> Education & Career Development	<input type="checkbox"/> Music/Performing Arts	<input type="checkbox"/> Mentoring
<input type="checkbox"/> The Arts	<input type="checkbox"/> Technology & Computers	<input type="checkbox"/> Nutrition
<input type="checkbox"/> Sports, Fitness & Recreation	<input type="checkbox"/> Teen Programs	<input type="checkbox"/> Health & Life Skills

RECENT EMPLOYMENT HISTORY

COMPANY:		ADDRESS:	
SUPERVISOR'S NAME:		PHONE:	
START DATE:		END DATE:	
START PAY:		END PAY:	
POSITION:		May we contact this employer?: <input type="checkbox"/> No <input type="checkbox"/> Yes	
Reason for leaving:			

Please attach information about any additional employment on a separate page (since last employed by BGCSC).

NEW REFERENCE (non-family)

Name:	Relationship:	Phone Number:

CERTIFICATIONS

Certification		Expiration Date:
Drivers License	<input type="checkbox"/> No <input type="checkbox"/> Yes State:	
First Aid	<input type="checkbox"/> No <input type="checkbox"/> Yes	
CPR	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Food Handlers Permit	<input type="checkbox"/> No <input type="checkbox"/> Yes State:	
Lifeguard/WSI	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Are you eligible for State or Federal Work Study? No Yes (If yes, what is the name of your college/university?)

NAME	
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This form grants the Boys & Girls Clubs of Spokane County permission to submit the information above to the local police departments and other appropriate agencies for a background check. The background check results will be released to the Boys & Girls Clubs of Spokane County to curb our parents concerns about adult supervision of the children in our programs and satisfy liability insurance requirements. All prospective employees are asked to complete this form, regardless of sex, race, color, creed or social status.

APPLICANT SIGNATURE		DATE	
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FOR OFFICE USE ONLY

Background check passed	<input type="checkbox"/> No <input type="checkbox"/> Yes	Date Entered	
Employee Number		Staff Initials	