



BOYS & GIRLS CLUB
OF THE BEMIDJI AREA

EMPLOYMENT APPLICATION

Equal Opportunity Employer & Program Provider

GENERAL

NAME	(Last)	(First)	(Middle Initial)	TELEPHONE (Area Code)
OTHER NAMES USED			EMAIL ADDRESS	
PRESENT STREET ADDRESS				
CITY, STATE, ZIP				
ARE YOU AT LEAST 18 YEARS OF AGE?		ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES?		IF NOT, DO YOU HAVE A WORK PERMIT?
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
HOW WERE YOU REFERRED TO THE BOYS & GIRLS CLUB OF THE BEMIDJI AREA?				
ARE YOU APPLYING FOR A WORK-STUDY POSITION OR REGULAR PAYROLL? <input type="checkbox"/> PAYROLL <input type="checkbox"/> WORK-STUDY (SEE NEXT LINE)				
-> IF WORK-STUDY DO YOU HAVE AN ALLOCATION? -> <input type="checkbox"/> YES <input type="checkbox"/> NO -> IF NO, ARE YOU ELIGIBLE TO GET AN ALLOCATION? <input type="checkbox"/> YES <input type="checkbox"/> NO				
PREVIOUS EMPLOYMENT WITH A BOYS & GIRLS CLUB OF THE BEMIDJI AREA or ANY OTHER BOYS & GIRLS CLUB ORGANIZATION (If any, give dates, positions)				
RELATIVES OR SIGNIFICANT OTHERS EMPLOYED BY BOYS & GIRLS CLUB OF THE BEMIDJI AREA (If any, give dates, positions)				
HAVE YOU BEEN CONVICTED OF, PLEAD GUILTY TO, AND/OR PLED <i>NOLO CONTENDRE</i> 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):				
<input type="checkbox"/> YES _____				
<input type="checkbox"/> 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 relations. A background check is required for all employee and volunteer applicants and will be administered prior to employment at the Boys & Girls Club of the Bemidji Area.

POSITION APPLIED FOR

TITLE(s) OR CATEGORY	DATE AVAILABLE	SALARY REQUIREMENTS
		\$ _____/HOUR OR \$ _____/ANNUAL

EDUCATION

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

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)	(City)	(State)	(Zip)
START DATE	END DATE	REASON FOR LEAVING	ARE YOU ELIGIBLE FOR REHIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES AND RESPONSIBILITIES WORK			

COMPANY NAME		YOUR TITLE	
COMPANY ADDRESS (Street)	(City)	(State)	(Zip)
START DATE	END DATE	REASON FOR LEAVING	ARE YOU ELIGIBLE FOR REHIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES AND RESPONSIBILITIES WORK			

COMPANY NAME		YOUR TITLE	
COMPANY ADDRESS (Street)	(City)	(State)	(Zip)
START DATE	END DATE	REASON FOR LEAVING	ARE YOU ELIGIBLE FOR REHIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO
SUPERVISOR'S NAME	SUPERVISOR'S TITLE	TELEPHONE	MAY WE CONTACT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
BRIEF DESCRIPTION OF DUTIES AND RESPONSIBILITIES WORK			

ADDITIONAL SKILLS

PLEASE LIST RELEVANT SKILLS & COMPETENCIES (PHYSICAL, ARTISTIC, ACADEMIC, EXPERIENTIAL, COMPUTER SOFTWARE, ETC):

OFFICE MACHINES YOU CAN OPERATE:

Please describe any other relevant experiences such as training, education, volunteerism, etc., not detailed above.

Can you perform this job (as detailed verbally or in the description) with or without reasonable accommodation? If you have certain hours restrictions (such as a class or activities schedule) please list them here. Please explain.

AUTHORIZATION TO RELEASE EMPLOYMENT REFERENCE INFORMATION

I understand that the Boys & Girls Club of the Bemidji Area (BGCBA) 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 BGCBA's review of this application and my candidacy for employment, I release BGCBA 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 BGCBA can contact references and make a full background check of my previous work history will be deemed interference with and withdrawal of my application for employment.

_____ *Yes _____ *No (Place your initials in the appropriate space to indicate and document your consent to this authorization)

Signature: _____ Date: _____

JOB APPLICANT AGREEMENT

I understand that the Boys & Girls Club of the Bemidji Area (BGCBA) requires certain information about me to evaluate my qualifications for employment and conduct its business if I become an employee, including a criminal background check. 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 BGCBA. The use of this applicant blank does not indicate there are positions open and does not in any way obligate BGCBA.

I also authorize BGCBA 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 BGCBA 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.

In consideration of my potential employment, I agree to conform to the rules of the BGCBA. I understand that I have the right to terminate my employment at any time with or without notice, with or without cause, and the BGCBA has a similar right. I understand my employment by BGCBA does not constitute a guarantee that any position be continued for any length of time or that any job assignment or shift be permanent.

I understand that I may be required to work scheduled and unscheduled overtime and scheduled weekend and holiday work when required by BGCBA. I also understand that BGCBA has the right to modify its policies without given me any notice of the changes. No promises regarding employment have been made to me. I understand that no one other than the Executive Director of the BGCBA has authority to make any other agreement.

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

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

Signature: _____ Date: _____

EQUAL OPPORTUNITY EMPLOYER & PROGRAM PROVIDER: We consider applicants without regard to race, color, creed, religion, national origin, age, sex, political affiliation or belief, marital status, disability, sexual orientation, or status with regard to public assistance. It is our policy to abide by all federal, state and local laws concerning discrimination.