



BOYS & GIRLS CLUBS OF PROVIDENCE
EMPLOYMENT APPLICATION

Qualified applicants will receive consideration without regard to race, color, religion, sex, age, national origin, or the presence of a non-job-related medical condition or handicap.

Boys & Girls Clubs of Providence has been part of a nationwide and local effort to help assure the protection of children from abuse and exploitation. Therefore, the boys & Girls Clubs of Providence will investigate the accuracy of data provided in the application process before appointment to the staff can be made.

Return To: _____

POSITION APPLYING FOR: _____ DATE OF APPLICATION: _____

GENERAL INFORMATION: (Please print or type)

Name: _____ Social Security #: _____

All other names by which known at any time: _____

Permanent Address: _____ Telephone #: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Are you 18 or older? _____ if not, state your age: _____

Are you a US Citizen? _____ if not, Visa type: _____

Are you legally eligible for employment in the US? Yes _____ No _____

Do you have a valid driver's license? Yes _____ No _____

From which State: _____ Chauffeur's: _____

Are you able to perform the duties of the position applying for: Yes ___ No ___

Have you ever been convicted of a crime(s)? Yes _____ No _____

If yes, describe in full as to convictions. _____

Have you ever been criminally charged with any crime related to the mistreatment, abuse or molestation of children?

Yes _____ No _____ If yes, describe in full _____

EDUCATION:

SCHOOL	NAME & LOCATION	COURSE OF STUDY	GRADUATE	DEGREE
College			YES NO	
High School			YES NO	
Other			YES NO	

EMPLOYMENT: - List all previous employment (use a blank piece of paper if necessary).

Dates Employed:
 From: _____ to _____ Company Name: _____
 Company Address: _____ Phone: _____
 Position: _____ Salary: _____ Supervisor: _____
 Average Hours Per Week: _____ Reason for Leaving: _____

Dates Employed:
 From: _____ to _____ Company Name: _____
 Company Address: _____ Phone: _____
 Position: _____ Salary: _____ Supervisor: _____
 Average Hours Per Week: _____ Reason for Leaving: _____

Dates Employed:
 From: _____ to _____ Company Name: _____
 Company Address: _____ Phone: _____
 Position: _____ Salary: _____ Supervisor: _____
 Average Hours Per Week: _____ Reason for Leaving: _____

VOLUNTEER EXPERIENCE:

AGENCY	ADDRESS	TELEPHONE #	SUPERVISOR	DATES
Duties:				

MILITARY: - Complete this section if you served in the US Armed Forces.

BRANCH OF SERVICE	FROM	TO	DUTIES AND ANY SPECIAL TRAINING

Discharge was voluntary: _____ Involuntary: _____
Describe circumstances if discharge was involuntary. _____

REFERENCES: - Three persons, including former employers, but not relatives.

NAME	ADDRESS	TELEPHONE #	OCCUPATION	HOW LONG KNOWN

SKILLS: - Please list any skills/ interests which might be relevant to the position you are applying for:

Do you hold current certification in:
CPR: _____ Date of Expiration: _____
ARC First Aid: _____ Date of Expiration: _____
ARC Advanced Lifesaving: _____ Date of Expiration: _____
ARC Water Safety Instruction: _____ Date of Expiration: _____
RI State Lifeguard Certification: Pool ___ Non-Surf ___ Surf ___ Date of Expiration: _____
Other skills for which you are certified: _____
Do you speak any language other than English? Yes _____ No _____
If so, please list: _____

BIOGRAPHICAL: - Please note if there is anything else about yourself of which you would like to tell us which has a bearing on your application for employment with us.

SIGNATURE:

I certify that all the answers given by me to all of the questions on this application and any attachment are true to the best of my knowledge.

I understand that if employed, any mis-statement or omission of fact on this application shall be considered cause for dismissal.

Signature

Date

For Boys & Girls Clubs of Providence Use Only

Category: Paid Full-time _____ Date Available: _____
 Paid Part-time _____ Hours Available: _____
 Volunteer _____

Reference Check Results:	Person Contacted	Results:

Interviewer Notes: _____

Interviewer's Signature: _____

If Applicant is Hired:

Date Employed: _____

Employee #: _____

Rate of Pay: _____

Date of Birth: _____