

**BOYS & GIRLS CLUBS OF PORTER COUNTY
APPLICATION FOR EMPLOYMENT**

PRE-EMPLOYMENT QUESTIONNAIRE

AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

Date: _____
MM/DD/YYYY

Name _____
Last, First MI

Present address _____
Street, City, State, Zip

Permanent address _____
Street, City, State, Zip

Phone number _____ Alternate phone number. _____
(XXX) XXX-XXXX (XXX) XXX-XXXX

Are you at least 18 years old? ____ Yes ____ No Are you at least 21? ____ Yes ____ No

*The Age Discrimination Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age. Birth date will be needed for a required background check if hired.

Have you ever been convicted of a felony or misdemeanor? ____ Yes ____ No

If so, please describe: _____

**You will not be denied employment solely because of a conviction unless the offense is related to the job for which you have applied.

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary requirements _____
(If known) (If any)

Are you employed now? ____ Yes ____ No If so, may we inquire of your present employer? ____ Yes ____ No

Have you ever applied to Boys & Girls Clubs of Porter County before? ____ Yes ____ No

If so, for what position? _____ When? _____

What hours are you available to work?

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____
Xam-Xpm

EDUCATION	Name & location of school	Number of years	Did you graduate?	Subject(s) studied
Elementary/middle school				
High school				
College/trade/technical School				

Current membership in National Guard or Reserves? ____ Yes ____ No

Please use the space at the bottom of this application to list additional information that might be useful.

FORMER EMPLOYERS (List the last four employers starting with current or most recent)

Date range:	Name, address & phone number of employer	Salary/wage	Your position and name of supervisor	Reason for leaving	Average hours per week
From - To					
M/YY - M/YY					
From - To					
M/YY - M/YY					
From - To					
M/YY - M/YY					
From - To					
M/YY - M/YY					
From - To					
M/YY - M/YY					

REFERENCES: Give the names of three persons, not related, whom you have known for at least one year.

Name	Address/phone	Business/how acquainted	Years known

In case of emergency notify: _____
Name, Relationship or Address, Phone

Referred by: ____ Newspaper ad. ____ Sign Friend (name) _____
 ____ Agency (name) _____ Relative (name) _____
 ____ Other? _____

I certify that the facts contained in this application are true and complete to the best of my knowledge, and understand that, if employed, falsified statements on the application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is not for a definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without my prior notice.

Signature _____ Date: _____
 (Please type initials. Signature will be obtained at interview)

Why do you want to work with children?

Have you ever worked with children before? _____ Yes _____ No

If yes, in what capacity and what responsibilities did you have?

How would you discipline a child who was talking back to you and not listening?

What do children need from leaders to help them grow up happy, healthy and competent?

What is your First Aid knowledge?

Do you have a valid drivers license? _____ Yes _____ No

If you've ever had your license revoked, suspended, or had traffic violation, please explain.

Please explain skills, hobbies, or interests you have that would enhance your qualifications.

Please check programs you could lead or assist children with:

- | | | | |
|-------------------------------------|--------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> 4--square | <input type="checkbox"/> Crafts | <input type="checkbox"/> Puppets | <input type="checkbox"/> Jump rope |
| <input type="checkbox"/> Story time | <input type="checkbox"/> Skits/plays | <input type="checkbox"/> Hopscotch | <input type="checkbox"/> Drawing |
| <input type="checkbox"/> Checkers | <input type="checkbox"/> Kickball | <input type="checkbox"/> Painting | <input type="checkbox"/> Chess |
| <input type="checkbox"/> Dodgeball | <input type="checkbox"/> Basketball | <input type="checkbox"/> Football | <input type="checkbox"/> Bowling |
| <input type="checkbox"/> Coloring | <input type="checkbox"/> Clay work | <input type="checkbox"/> Singing | <input type="checkbox"/> Card games |
| <input type="checkbox"/> Crosswords | <input type="checkbox"/> Homework | <input type="checkbox"/> Nature study | |

Additional information that might be useful:
