



BOYS & GIRLS CLUBS
OF THE COLUMBIA BASIN

Application for Employment

OFFICE USE ONLY

Application Date: _____ Interview Date: _____

Start Date: _____ Club Location: _____

APPLICATION FOR EMPLOYMENT

PLEASE PRINT LEGIBLY

Full Name: _____ Position Applying for: _____

Address: _____ Date of Birth: _____

Cell Phone Number: _____ Social Security Number: _____

Driver's License Number: _____ Email Address: _____

List Any Days You Cannot Work: _____ Date You Can Start Work: _____

Have you worked for Boys & Girls Clubs before? Yes _____ No _____

Are you willing to work additional hours as required for special events? Yes _____ No _____

Are you willing to work at our school-based Club locations? Yes _____ No _____

Do you hold a current Washington State driver's license? Yes _____ No _____

Are you over the age of 18? Yes _____ No _____

Are you a citizen, or are you authorized to work in the U.S.? Yes _____ No _____

Any traffic violations in the last 3 years? Yes _____ No _____

Can you pass a local, state, national & international background check? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please describe conditions: _____

GREAT FUTURES START HERE.

EDUCATION

NAME OF SCHOOL	NUMBER OF YEARS	GRADUATE?	SUBJECTS STUDIED
High School	_____	_____	_____
College or University	_____	_____	_____
Trade or Business School	_____	_____	_____
Graduate School	_____	_____	_____

EMPLOYMENT HISTORY (1)

START WITH PRESENT OR LAST POSITION

Employer	_____		
Address	_____		
Supervisor	_____	Phone Number	_____
Position Title	_____	Last Salary	_____
Duties	_____		
Start Date	_____	End Date	_____
Reason for Leaving	_____		

EMPLOYMENT HISTORY (2)

Employer	_____		
Address	_____		
Supervisor	_____	Phone Number	_____
Position Title	_____	Last Salary	_____
Duties	_____		
Start Date	_____	End Date	_____
Reason for Leaving	_____		

GREAT FUTURES START [HERE.](#)

EMPLOYMENT HISTORY (3)

Employer	_____		
Address	_____		
Supervisor	_____	Phone Number	_____
Position Title	_____	Last Salary	_____
Duties	_____		
Start Date	_____	End Date	_____
Reason for Leaving	_____		

SKILLS

5: My specialty 4: Confident to Lead 3: Confident to Assist Activity
2: Limited Experience 1: No Experience

Computers_____	Arts & Crafts_____	Teen Programs_____
Athletics_____	Game Room_____	Homework Help_____
Drama_____	Dance/Movement_____	Writing Skills_____
Health/Nutrition_____	Outdoor Recreation_____	Sports_____

REFERENCES

REFERENCE	NAME	OCCUPATION	PHONE NUMBER
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Reference #1	_____	_____	_____
Reference #2	_____	_____	_____
Reference #3	_____	_____	_____

I certify that the above is true to the best of my knowledge. I understand that untruthful or misleading information is cause for rejection of my application or dismissal if employed. I authorize an investigation of statements contained in this application, which will allow the employer to make an employment decision.

Signature

Date

GREAT FUTURES START HERE.



Background Check Release

This form grants the Boys and Girls Clubs of the Columbia Basin permission to submit the information below to Veriscreen, the local police departments, and other appropriate agencies for a background check. The Boys and Girls Club of the Columbia Basin will conduct initial and ongoing criminal background checks of all employees, including minors, board volunteers, and all volunteers including partners and minors, who have direct, repetitive contact with children. Name-based searches may be used in any combination but will, at a minimum,

- Verify the person’s identity and legal aliases through verification of a social security number,
- Provide a national Sex Offender Registry search,
- Provide a comprehensive criminal search which includes a national search,
- Provide a comprehensive local criminal search which includes either a statewide criminal search or county-level criminal search.
- a motor vehicle record and child abuse registry.

Such checks will be conducted before employment and at regular intervals, not to exceed twelve (12) months. All current and prospective board members, staff, and volunteers are asked to complete this form, regardless of sex, race, color, creed or social status.

BACKGROUND CHECK INFORMATION FOR RELEASE

PLEASE PRINT LEGIBLY

First Name _____ Middle Initial _____ Last Name _____

Address _____ City _____ Zip Code _____

Place of Birth _____ Email _____

Social Security Number _____ Phone _____

Driver’s License Number _____ Date of Birth _____

Have you ever been arrested? No _____ Yes, for _____

Have you ever been convicted of a crime? No _____ Yes, for _____

Are there any outstanding warrants against you? No _____ Yes, for _____

Are you currently taking any prescription medication? No _____ Yes, for _____

Please list any mental or physical disability that would impact your ability to serve as a board member, employee, or volunteer in any capacity or would require special accommodations from our program:

In signing this form, you agree that the information provided above is accurate to the best of your knowledge. You also agree to remain within the scope of the Boys and Girls Club of America and the Boys & Girls Clubs of the Columbia Basin policies. We understand this information is very private. This information will be kept extremely confidential and used for background check purposes only.

Printed Name

Date

Signature

Date

Staff Signature

Date

GREAT FUTURES START [HERE.](#)

Driving Record Release of Interest

Employers, prospective employers, volunteer organizations, or their agent can get driving records for an employee, prospective employee, or volunteer when authorized. Use this form to get their authorization.

- Complete the Company section.
- Give this form to your employee, prospective employee, or volunteer to complete their section.
- For audit purposes, keep this completed form in your files for at least five years. Do not mail it to the Department of Licensing.

Sealed juvenile records. Information contained in a driving record related to a sealed juvenile record may not be used for any purpose unless required by federal law. The employee or prospective employee may furnish a copy of the court order sealing the juvenile record to the employer, prospective employer, or their agent.

Company—To be completed by the company or the agent of the company

PRINT or TYPE Company name	
Agent company name (if applicable)	
Company/Agent company address	
Authorized representative name	Title
<p>Answer the following</p> <p>1. Is this company an employer, prospective employer, or volunteer organization of the individual whose driving record is being requested? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Is the record you are requesting necessary for employment purposes related to driving by the employee or prospective employee as a condition of employment or related to driving by the volunteer at the direction of the volunteer organization? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Do you agree to use the information contained in the record exclusively for this purpose and not divulge it to a third party? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Do you agree to hold harmless the Washington State Department of Licensing for all matters relating to the release of the requested driving record? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Certification</p> <p><i>I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.</i></p> <p style="text-align: center;">X</p>	
Date and place (city or county) signed	Authorized representative signature

Employee, prospective employee, or volunteer—Complete this section and return the form to the company

PRINT or TYPE Full name (First, Middle, Last)	Date of birth (mm/dd/yyyy)	WA driver license number
<p>Authorization from</p> <p><input type="checkbox"/> Employee—for release of my driving record for employment purposes, at my employer’s discretion for the full term of my employment</p> <p><input type="checkbox"/> Prospective employee—for release of my driving record for employment purposes, not to exceed 30 days from date signed</p> <p><input type="checkbox"/> Volunteer—for release of my driving record for a position applied for that requires me driving at the direction of the volunteer organization</p>		
Employer, prospective employer, or volunteer organization name		
Employer agent company name if acting on behalf of the company for employment purposes		
<p>Authorization</p> <p><i>I am an employee, prospective employee, or volunteer of the company named above and I request that a copy of my Washington State driving record be sent to them/their agent.</i></p> <p style="text-align: center;">X</p>		
Signature		Date