

APPLICATION FOR EMPLOYMENT (Please Print in Ink) GIRLS INCORPORATED @of Greater Santa Barbara				Date:
Name: Last	First	Middle	Maiden:	Social Security #:
Address: Number	Street	City	State	Zip
Home Phone:		Business Phone:		
Cell Phone:				
E-mail Address:			<input type="checkbox"/> Santa Barbara Center <input type="checkbox"/> Goleta Valley Center <input type="checkbox"/> Fun in the Sun <input type="checkbox"/> Other _____	
Position for which you are applying:				

Were you previously employed by Girls Incorporated? _____
If yes, when? _____

List any friends or relatives working for us: _____

How did you find out about Girls Incorporated? _____

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses _____
If yes, describe: _____

List activities and other special achievements which you feel will be of importance in your work (languages, certifications, trainings, etc): _____

List organizations with which you are or have been associated with (church, social, community, school, professional, trade, etc.): _____

For Community Care Licensing purposes for child care center staff, please list relevant coursework in the following areas: psychology, sociology, art, music, dance, drama, education, recreation.

EDUCATION

School Level	Name, City, State	Attended From/To	Grad Mo./Year	Type of Degree	Major Course Of Study
High School					
Post-Secondary	(1)				
	(2)				
Other Training					

EMPLOYEE EXPERIENCE

Company Name:	Address:	Phone:	Supervisor:
Position:	Dates From and To:	Reason for Leaving:	Rate of Pay:
Name:	Address:	Phone:	Supervisor:
Position:	Dates From and To:	Reason for Leaving:	Rate of Pay:
Name:	Address:	Phone:	Supervisor:
Position:	Dates From and To:	Reason for Leaving:	Rate of Pay:

REFERENCES: Give names and addresses of 3 people not related to you who have knowledge of your character, ability and experience. (NOTE: In our investigation of references and/or past employment we may communicate with some or all of the persons and/or companies listed on this application).

Full Name	Address	Daytime Phone Number

I understand and agree that false statements made in this application are cause for rejection of this application, or dismissal.

Signature of Applicant: _____ Date: _____

Availability:

Please record the days and times you are available for work. Our hours in the summer are M-F 7:30am-6:00pm and you can work no more than 8 hours per day and no more than 40 hours per week. During the school year, we are open from 12:00-6:00pm M-F.

Mon: _____

Tues: _____

Wed: _____

Thurs: _____

Fri: _____