



140 Broadway
Providence, RI 02903

APPLICATION FOR EMPLOYMENT

Please complete entire application

Basic Information

Position Applied for: _____ Date of Application: _____

Referral Source:

Email Address: _____

- | | | |
|--|---|--------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Employee | <input type="checkbox"/> Other |
| <input type="checkbox"/> Walk-In | <input type="checkbox"/> Private Employment Agency | |
| <input type="checkbox"/> Relative | <input type="checkbox"/> Government Employment Agency | |

(Example: Name of person, Prov. Journal, Boston Globe, Monster, MS web site, did field work here, etc.)

Name or source (if applicable): _____

Last Name: _____ First: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: () - _____ Social Security Number: _____

Drivers License Number: _____ State: _____

If you are under 18, can you furnish a work permit? Yes No

Are you legally eligible for employment in this country? Yes No

(Proof of U.S. citizenship or immigration status will be required upon employment)

Are you available to work Mondays-Thursdays 2:00-5:30, and Fridays 2:00-4:30? Yes No

Have you ever been bonded? Yes No

Have you been convicted of a felony in the last seven (7) years? Yes No

(Such conviction may be relevant if job related, but does not bar you from employment)

If yes, explain

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Please explain any gaps in employment in the comment section below.

Do not refer us to your resume – this section must be filled in to make your application complete.

Can we contact your current employer? Yes No

Job Title:	Description of Duties:		
Employer:	Telephone: () -		
City:	State:	Zip:	<u>Dates Employed</u>
Immediate Supervisor and Title:	From	To	
Reason for leaving:	<u>Final Hourly Rate/Salary</u>		
	\$	Per	
Job Title:	Description of Duties:		
Employer:	Telephone: () -		
City:	State:	Zip:	<u>Dates Employed</u>
Immediate Supervisor and Title:	From	To	
Reason for leaving:	<u>Final Hourly Rate/Salary</u>		
	\$	Per	
Job Title:	Description of Duties:		
Employer:	Telephone: () -		
City:	State:	Zip:	<u>Dates Employed</u>
Immediate Supervisor and Title:	From	To	
Reason for leaving:	<u>Final Hourly Rate/Salary</u>		
	\$	Per	
Job Title:	Description of Duties:		
Employer:	Telephone: () -		
City:	State:	Zip:	<u>Dates Employed</u>
Immediate Supervisor and Title:	From	To	
Reason for leaving:	<u>Final Hourly Rate/Salary</u>		
	\$	Per	

Comments:

Skills and Qualifications

List any special skills and qualifications acquired from employment, special accomplishments, publications or awards. Exclude information, which would reveal sex, race, religion, national origin, age, disability or other protected status.

What are your computer/data/web skills?

Educational Background

List last three (3) schools attended, starting with the last one. Include number of years completed, degree or diploma earned, if any, grade point average or class rank and major and minor field of study (if applicable).

School	# of years completed	Degree/Diploma	GPA/Class Rank	Major/Minor

List any foreign language(s) and check the box that best describes your skill level.

Please include your proficiency level in each language area: **Basic** **Intermediate** **Fluent**

Language	Read	Write	Speak

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Narrative

Why are you applying for this position?

Please describe your experience working with youth. Do you have experience planning and/or leading activities? If yes, please indicate the age group of the youth.

References

List name and telephone number of references. (S=Supervisor, C=Co-worker, SB=Subordinate, P=Personal)
Please include at least two (2) supervisors.

Name	Position/ Title	Code	Telephone	Years Known
			() -	
			() -	
			() -	
			() -	

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause or cancellation of this application and/or separation from The Providence After School Alliance (PASA) if I have been employed. I understand that my employment with PASA is "at will" and that I may terminate the employment relationship at any time for any reason and PASA reserves the same right. I understand that no representative of PASA has the authority to make any assurance to the contrary.

I give PASA the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability PASA and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand that PASA is an Equal Opportunity Employer. PASA does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing applicant's consideration for employment on a basis prohibited by local, state or federal law.

Signature of Applicant

Date