



Austin YMBL Sunshine Camps Application for Employment

2225 Andrew Zilker Rd. Austin, TX 78746

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and or interview process should notify a staff representative.

POSITION APPLIED FOR: _____ DATE: _____

NAME _____ NICKNAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP

PERMANENT ADDRESS _____
STREET CITY STATE ZIP

HOME PHONE () _____ CELL PHONE () _____ PAGER # () _____

E-MAIL ADDRESS _____ SOCIAL SECURITY NUMBER _____

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT WOULD INHIBIT YOUR PERFORMANCE OF REQUIRED DUTIES? _____

ARE YOU OVER 18? YES NO ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY? YES NO

DRIVERS LICENSE NUMBER _____ STATE _____

HAVE YOU EVER BEEN EMPLOYED BY ASC BEFORE? YES NO IF YES, PLEASE GIVE DATES _____

HAVE YOU EVER PLED "GUILTY" OR "NO CONTEST" OR BEEN CONVICTED OF A CRIME? IF YES, PLEASE EXPLAIN _____

CONVICTIONS: A conviction does not automatically mean you will not be offered a job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility. Give all the facts, so that a fair decision can be made.

ARE YOU ABLE TO MEET THE ATTENDANCE REQUIREMENTS OF THIS POSITION? _____

DATE AVAILABLE FOR WORK: _____ DESIRED SALARY: _____

EDUCATIONAL BACKGROUND

LIST SCHOOLS ATTENDED, BEGINNING WITH MOST RECENT, HIGHT SCHOOL THROUGH COLLEGE.

SCHOOL ATTENDED	YEARS	DEGREE	MAJOR

EMPLOYMENT HISTORY

PLEASE LIST YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT

EMPLOYER _____	PHONE NUMBER _____
ADDRESS _____	
SUPERVISORS NAME _____	POSITION _____
JOB TITLE _____	HOURLY RATE / SALARY \$ _____
DESCRIPTION OF RESPONSIBILITY: _____	

DATES EMPLOYED: _____	REASON FOR LEAVING? _____
MAY WE CONTACT FOR A REFERENCE? _____	

EMPLOYER _____	PHONE NUMBER _____
ADDRESS _____	
SUPERVISORS NAME _____	POSITION _____
JOB TITLE _____	HOURLY RATE / SALARY \$ _____
DESCRIPTION OF RESPONSIBILITY: _____	

DATES EMPLOYED: _____	REASON FOR LEAVING: _____
MAY WE CONTACT FOR A REFERENCE? _____	

EMPLOYER _____	PHONE NUMBER _____
ADDRESS _____	
SUPERVISORS NAME _____	POSITION _____
JOB TITLE _____	HOURLY RATE / SALARY \$ _____
DESCRIPTION OF RESPONSIBILITY: _____	

DATES EMPLOYED: _____	REASON FOR LEAVING: _____
MAY WE CONTACT FOR A REFERENCE? _____	

SKILLS, QUALIFICATIONS, HOBBIES AND HONORS RECEIVED

PLEASE LIST ANY SPECIAL SKILLS, QUALIFICATIONS OR HOBBIES THAT MEY BEE USEFUL IN THIS POSITION. INCLUDE FOREIGN LANGUAGES, MUSICAL ABILITY, OR SPORTS EXPERIENCE (ROPES COURSE, ROCK CLIMBING, CAMPING...) COMMUNITY SERVICE OR ANY OTHER VOLUNTEER WORK.

CERTIFICATIONS

PLEASE LIST CERTIFICATIONS OR TRAINING YOU MAY ALREADY HAVE.

TYPE OF CERTIFICATION	DATE RECEIVED	DATE OF EXPIRATION

PERSONAL REFERENCES

LIST PERSONAL OR SCHOOL REFERENCES INCLUDE PHONE NUMBERS AND INFORMATION REGARDING BEST TIME TO REACH.

NAME	PHONE #	RELATIONSHIP	YEARS KNOWN

WHY ME?

PLEASE WRITE A PARAGRAPH TELLING WHY WE SHOULD HIRE YOU FOR THIS POSITION. _____

SUPPLEMENT TO APPLICATION

WHY DO YOU WANT TO WORK WITH AND CARE FOR CHILDREN? _____

WITH WHAT AGE GROUP OR GENDER DO YOU PREFER TO WORK? WHY? _____

HOW WOULD YOU DESCRIBE YOURSELF? _____

DESCRIBE NON-EMPLOYMENT ACTIVITIES YOU HAVE BEEN ENGAGED IN THAT MIGHT STRENGTHEN YOUR APPLICATION. _____

I hereby certify that the information provided on this application is true, complete, correct, and subject to verification by Austin Sunshine Camps (ASC).

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain all information from all references (personal and professional), employer, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application resume or job interview. I hereby waive any and all rights and claims I have regarding the employer, its agents, employees, or representatives for seeking, gathering, and using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

I authorize ASC to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest.

I also understand that my employment is conditional until results of my criminal history record, reference checks, and other documents required by law are completed, and until information given by me has been verified.

I understand that completion of this form does not guarantee me status as an applicant or any consideration for employment unless I meet all stated minimum qualifications required of the position for which I am asking to be considered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I have read the above statement and accept the same as a condition of my employment with the Austin Sunshine Camps. This application is valid for 30 days only.

Applicant Signature: _____

Date of application: _____