



An Equal Opportunity Employer
Big Brothers Big Sisters of Orange County and the Inland Empire

EMPLOYMENT APPLICATION

Please Print

Date: _____

SSN: _____

If submitting electronically, DO NOT send your Social Security number via e-mail; please call the hiring manager and provide via telephone

Name: _____
Last First Middle

(_____) _____ (_____) _____ _____
Business Telephone Primary Telephone Date of Birth (MM/DD/YY)

Present Address:

Permanent Address:

Address

Address

City State Zip

City State Zip

Employment Desired

Position applying for: _____

Are you applying for:

Regular full-time work?	Yes	No
Regular part-time work?	Yes	No
Temporary work, e.g. summer or holiday work?	Yes	No

What days and hours are you available for work? _____

If applying for temporary work, during what period of time will you be available?

From: _____ To: _____

Are you available for work on weekends? Yes No

Would you be available for work overtime, if necessary? Yes No

If hired, on what date can you start work? _____

Salary desired: _____

Personal Information

Have you ever applied to or worked for BB/BSOC? Yes No

If yes, when? _____

Do you have any friends or relatives working for BB/BSOC? Yes No

If yes, state name(s) and relationship: _____

Why are you applying for work at BB/BSOC? _____

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you at least 18 years old? Yes No

(If under 18, hire is subject to verification that you are of minimum legal age.)

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Are you able to perform the essential functions of the job for which you are applying? Yes No

If no, describe the functions that cannot be performed. _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Are you able to perform other duties of the job for which you are applying? Yes No

If no, describe the functions that cannot be performed. _____

(Note: Hire may be subject to passing a medical examination and to skill and agility tests.)

Are you currently employed? Yes No

If so, may we contact your current employer? Yes No

Have you taken the Gallup StrengthsFinder Assessment? Yes No

If yes, please list your top 5 strengths: _____

Education, Training and Experience

School	Name and Address	No. of years completed	Did you graduate?	Degree or Diploma
High School				
College/ University				
Other				

Do you speak, write or understand any foreign languages? Yes No

If yes, which language(s)? _____

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at BB/BSOC? If so, please explain.

Answer the following questions if you are applying for a professional position.

Are you licensed/certified for the job applied for? Yes No

Name of license/certification: _____

Has your license/certification ever been revoked or suspended? Yes No

If yes, state reason(s), date of revocation or suspension and date of reinstatement.

Military Service

Have you obtained any special skills or abilities as a result of service in the military? Yes No

Is so, describe: _____

Employment History

List below all present and past employment, starting with your most recent employer (last 10 years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of employer: _____

Type of business: _____

Address _____

Supervisor's Name _____

City _____ State _____ Zip _____

Telephone No. _____

Your position and duties: _____

Date of employment: From: _____ To: _____

Reasons for leaving: _____

Name of employer: _____

Type of business: _____

Address _____

Supervisor's Name _____

City _____ State _____ Zip _____

Telephone No. _____

Your position and duties: _____

Date of employment: From: _____ To: _____

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Address _____

Supervisor's Name _____

City _____ State _____ Zip _____

Telephone No. _____

Your position and duties: _____

Date of employment: From: _____ To: _____

Reasons for leaving: _____

References

List below three persons, not related to you, who have knowledge of your work performance within the last three years.

Reference #1

Name

Address

City State Zip

Telephone Number

Occupation

Number of Years Acquainted

Reference #2

Name

Address

City State Zip

Telephone Number

Occupation

Number of Years Acquainted

Reference #3

Name

Address

City State Zip

Telephone Number

Occupation

Number of Years Acquainted

Optional Reference

Name

Address

City State Zip

Telephone Number

Occupation

Number of Years Acquainted

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize Big Brothers/Big Sisters of Orange County to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Big Brothers/Big Sisters of Orange County, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I hereby give my consent to Big Brothers Big Sisters of Orange County, to obtain information about me from local, state, and federal law enforcement agencies, motor vehicle departments, court, military agencies, and other public and/or I hereby give my consent to Big Brothers Big Sisters of Orange County, to obtain information about me from private agencies deemed appropriate in an investigation of my background. I further give consent to the agencies indicated to release any information about me to Big Brothers Big Sisters of Orange County or anyone acting on their behalf.

_____ I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by Big Brothers/Big Sisters of Orange County, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the agency, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an unemployment contract between me and the agency. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the agency, and that no promises or representations contrary to the foregoing are binding on the agency unless made in writing and signed by me and the agency's designated representative.

_____ Date

_____ Signature