

Boys & Girls Club of Chattanooga  
P.O. Box 11567  
Chattanooga, TN 37401  
(423) 266-6131

## APPLICATION FOR EMPLOYMENT

East Lake Unit  
2125 E. 25<sup>th</sup> St. Place, 37407  
629-4943

Highland Park Unit  
2312 Duncan Avenue, 37404  
629-0008

**\*\*\*ALL APPLICANTS WILL BE SUBJECT TO A CONFIDENTIAL DRUG TEST AND BACKGROUND SCREENING\*\*\***

### PERSONAL INFORMATION

Name: \_\_\_\_\_, \_\_\_\_\_ Position Applying For: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Drivers License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ ST: \_\_\_\_\_

### EDUCATION

INSTITUTION	NAME & ADDRESS	No. of years ATTENDED	MAJOR	Did you Graduate?	(if so) DATE
High School					
Night School					
Correspondence School					
College/University					

**EMPLOYMENT INFORMATION:** Give names and addresses of ALL previous employers (including Civil Service). If you are presently working, give employer and reason for leaving. Also, give reason for lapse of time where a period of termination at one place of employment does not fit into the next place of employment. (Attach additional sheet if necessary)

EMPLOYER'S NAME, ADDRESS & PHONE NUMBER	Description of Work	Wages	Start Date	End Date	Reason
1.					
2.					
3.					

### MILITARY EXPERIENCE

\_\_\_\_\_  
Branch of Service      Date Inducted      Date Discharged      Rank      Salary      Remarks

## EXPERIENCE AND SPECIAL SKILLS *(if applicable)*

Please review the activities listed below as they pertain to your work experience. Place a check mark as follows:  
ONE Check for: Experience in or special training acquired by you; TWO Checks for: Activities organized or directed by you.

Athletics	_____	Summer Camp	_____	Group Clubs	_____
Children's Games	_____	Games Room	_____	Youth Guidance	_____
Gymnastics	_____	Library	_____	Vocational Guide	_____
Swimming Pool	_____	Story-Telling	_____	Arts & Crafts	_____
Playground	_____	Dramatics	_____	Special Events	_____
Day Camp	_____	Music	_____	*Other (list)	_____

\*Explain if Other: \_\_\_\_\_

## REFERENCES (non-relative)

- 1) Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Known: \_\_\_\_\_
- 2) Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Known: \_\_\_\_\_
- 3) Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Known: \_\_\_\_\_
- 4) Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Known: \_\_\_\_\_

**The BGCC is part of a drug-free work force. Employees and Volunteers are required to pass a background check and/or drug test. By signing below I am agreeing that I understand and consent to this policy. I also hereby declare that the information stated in this application is true and correct to the best of my knowledge.**

### Applicant:

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
*Social Security Number*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

## **\*\*For Internal Use ONLY\*\***

INTERVIEW DATE: \_\_\_\_\_ INTERVIEWER: \_\_\_\_\_ UNIT: \_\_\_\_\_

Result of Interview (explain in detail): \_\_\_\_\_

## REFERENCE RESPONSES *(at least 2 work references)*

1. Name: \_\_\_\_\_ Response: \_\_\_\_\_

2. Name: \_\_\_\_\_ Response: \_\_\_\_\_

3. Name: \_\_\_\_\_ Response: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_

STARTING SALARY (hourly rate): \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

&

\_\_\_\_\_

*Program Manager signature*

*Executive Vice President signature*