Action League of the Foothills
4607 Oakwood Avenue
La Cañada Flintridge, CA 91011

APPLICATION FOR EMPLOYMENT

Please type or print

POSITION DESIRED _____ DATE _____

NAME _____
Last First Middle

ADDRESS _____ PHONE _____
Street and Number Main # Home/Cell/Work

_____ _____
City and State Zip Code Alternate # Home/Cell/Work

E-MAIL _____

Advanced Education/ Job Preparation
(List any Business, Trade, or Correspondence Training)

Name of School Address Types of Courses, Degrees or Certificates

_____ _____

_____ _____

Special Skills: (such as music, art, computers, foreign languages, sports etc.)

_____

_____

Certificates, licenses, or other proof of technical or professional competence:

_____

Other than routine violations, have you ever been convicted of a crime? _____ Write "yes" even if no conviction has resulted, but the outcome is pending. NOTE: DO NOT list convictions for marijuana possession or use occurring more than two years ago unless the possession or use was on the grounds of a school *(California Labor Code Section 432.7).* If your answer to this question is "yes", give details below.

_____

_____

Have you ever used illegal drugs? Yes____No____ If "yes", when was the last time you used illegal drugs? _____

All applicants seeking positions that have contact with minors are required to be fingerprinted and undergo a California Department of Justice clearance prior to employment.

Have you ever been dismissed, or asked to resign, from any position? Yes___No___ If your answer to this question is "yes", give details below.

_____

_____

Are you legally eligible for work in the United States? Yes _____ No _____

All Action League of the Foothills employees are required to complete an I-9 form.

REFERENCES

I authorize Action League of the Foothills to make an investigation of my employment history, and authorize any former employer, person, firm, corporation, or government agency to give Action League of the Foothills any information they may have regarding me. In consideration of Action League of the Foothills' review of this application, I release Action League of the Foothills and all providers of information from any liability as a result of furnishing and receiving this information.

Those who have knowledge of your teaching, work, and volunteer experience.

Please type or print

1._____ _____
Name and Title Business Telephone Number

_____
Business Address (please include zip code)

_____ _____
Month and Year hired Month and Year ended

2._____ _____
Name and Title Business Telephone Number

_____
Business Address (please include zip code)

_____ _____
Month and Year hired Month and Year ended

EMPLOYMENT INFORMATION

Starting with your present employment and working back, list all present and former employers.
You may include relevant unpaid or volunteer experience, and include periods of unemployment.

Employer _____ From_____
Address _____ To_____
_____ Full Time ( ) Part Time ( )
Supervisor's Name & Title_____ Last Salary_____
Job Description _____ Reason for leaving_____
_____ _____

Employer _____ From_____
Address _____ To_____
_____ Full Time ( ) Part Time ( )
Supervisor's Name & Title_____ Last Salary_____
Job Description _____ Reason for leaving_____
_____ _____

It is the policy of Action League of the Foothills not to discriminate on the basis of race, religion, color, national origin, ancestry, disability, medical condition, marital status, sex, age, sexual orientation or any other unlawful basis in its educational programs, activities, or employment policies as required by Title IX of the 1972 Education Amendments, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, the California Fair Employment and Housing Act, and other applicable laws and regulations.

Any misstatements or omissions of material fact in this application may be cause for dismissal.

I hereby affirm that all of the statements made in this application are true to the best of my knowledge and belief.

_____ _____
Signature of Applicant Date