Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
What times are you available? Please include start and finish time.

Mon \_\_\_\_\_│\_\_\_\_\_\_ Tues \_\_\_\_\_│\_\_\_\_\_\_ Wed \_\_\_\_\_│\_\_\_\_\_\_ Thurs \_\_\_\_\_│\_\_\_\_\_\_ Fri \_\_\_\_\_│\_\_\_\_\_\_

Approximately how many hours a week are you interested in working? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check off any skills/experience you would be able to provide us with:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ Education□ Arts /Crafts□ Photography | □ Clerical Work□ Music/ Dance□ Grant Writing | □ Computers/IT□ Repairs□ Sewing | □ Fund Raising□ Cooking□ Pro-Bono services | □ Event Planning□ Gardening□ Carpentry |

Additional skills: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a felony? □Yes □No

If ‘yes,’ please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the names of additional work-related references. Individuals with no prior work experience may list school or volunteer related references.

|  |  |  |
| --- | --- | --- |
| Name | Relationship | Phone |
|  |  |  |
|  |  |  |
|  |  |  |

May we contact? □Yes □No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Applicant Certification**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| *I understand and agree that, as a condition of volunteering, and to the extent, permitted by federal, state, and local law, I may be required to sign confidentiality, non-compete, and/or conflict of interest statement.* | □Yes □No |
| *I have received a Child Abuse Record Information (CARI) form and give permission for a CARI check.* | □Yes □No |

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand and agree that if driving is a requirement of my particular duties as a volunteer I must possess a valid driver’s license and automobile liability insurance in an amount equal to the minimum require by the state where I reside.

I understand that Better Beginnings may now have, or established, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If Better Beginnings has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Better Beginnings’ policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized test designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drugs is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Better Beginnings’ policies and applicable federal, state, and local law.

*I hereby certify that my answers and assertions set forth in this application are true and complete to the best of my knowledge. If I am employed, I understand that any false statements of this application shall be considered sufficient cause for my dismissal. I hereby authorize this company to investigate any aspect of my prior educational and employment history.*

*Furthermore I understand that if I am hired, employment with Better Beginnings’ is “at will” which means that either the Better Beginnings’ or I can terminate my employment for any reason not prohibited by state or federal law.*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

If the applicant is a minor, the foregoing release and consent must be signed by the applicant’s parents or legal guardian. Signature by the applicant’s parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that Better Beginnings’, to the extent permitted by federal, state, and local law, can test the applicant for controlled substances, and communicate screen results to Better Beginnings’ personnel who need to know, the applicant, and the applicant’s legal guardian.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Parent/Legal Guardian Witness

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date Date