

WILLITS KIDS CLUB, INC.
P.O. BOX 1845
WILLITS, CA 95490

Employee Application

Type or Print only

Date _____

Name _____ DOB: _____

Address _____

Telephone _____ Message phone _____

Position applied for _____

What days and hours are you available to work? _____

Would you accept employment on a substitute (on-call, as needed) basis? Yes _____ No _____

NOTICE

In compliance with A.B. 1610, prior to starting employment with the Willits Kids Club, you must pass fingerprinting clearance. Until your background check has been completed, and you have received a clearance from the DOJ, you may not begin work. You must also have a current T.B. test

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

If "yes", please give year of offense and outcome: _____

Applicants will not necessarily be denied employment solely on the grounds of conviction of a criminal offense unless, per A.B. 1610, the offense is a violent or serious felony as specified in sections 667.5 and 1192.7 of the California State Penal Code. In cases of prior offenses not included in Penal Code Sections 667.5 and 1192.7, the nature of the offense, date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) for which you have applied may, however, be considered.

EDUCATION – Minimum requirements are AA or passing grade on the WUSD Instructional Assistant Test

<u>Name of School</u>	<u>Graduate (yes/no)</u>	<u>Degree/Certificate Rec'd</u>
High School _____		
Jr. College _____		
College/University _____		
Other _____		

Have you passed the WUSD instructional assistants test? _____

What language(s) do you speak, write or understand? _____

Do you have any other experience, training, qualification or skills which you feel make you especially suited for work in the Willits Kids Club? If so, please explain _____

EMPLOYMENT HISTORY (starting with most recent position). If you need additional space, attach a separate piece of paper.

Name of Employer:	Employer's Address and Phone Number:
Employed (from/to month/year) :	Title/Description of Duties: Salary/Reasons for leaving

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REFERENCES

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

Name: _____ Telephone (____) _____

Address (City, State, Zip): _____

Occupation: _____ No. of years acquainted: _____

Name: _____ Telephone (____) _____

Address (City, State, Zip): _____

Occupation: _____ No. of years acquainted: _____

Name: _____ Telephone (____) _____

Address (City, State, Zip): _____

Occupation: _____ No. of years acquainted: _____

I certify that the facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application may result in my immediate dismissal.

I hereby authorize all previous employers and listed references to give any and all information regarding my employment, plus any other information from personal knowledge or records. I release from all liability, persons and organizations reporting information required by this application.

I understand only selected applicants will be notified of interview dates and the final job status and that my application will be kept on file for one year only.

Signature

Date