



**POSITION APPLYING FOR:**

<input type="checkbox"/> Activity Instructor	<input type="checkbox"/> Group Leader	<input type="checkbox"/> AM & PM
<input type="checkbox"/> Group Assistant	<input type="checkbox"/> Support Staff	<input type="checkbox"/> AM Only
<input type="checkbox"/> Substitute	<input type="checkbox"/> Bus Driver	<input type="checkbox"/> PM Only
<input type="checkbox"/> Other: _____		

## EMPLOYMENT APPLICATION

8905 Ox Road | Lorton, VA 22079 | 888.581.3555 |

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
LAST FIRST M.I.

Address: \_\_\_\_\_  
STREET APT. # CITY STATE ZIP

Phone Numbers: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ext. \_\_\_\_\_  
HOME CELL WORK

Email address: \_\_\_\_\_ What is the best way to contact you? \_\_\_\_\_

What date are you available for employment? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Are you 18 years of age or older?  Yes  No

If no, please state age: \_\_\_\_\_

Are you authorized to work in the U.S.?  Yes  No

If hired, you will be required to provide documentation showing you have the legal right to work in the United States, ex. proof of citizenship, permanent or temporary employment eligibility (Form I-9 of the Immigration and Naturalization Service).

Do you have any medical condition(s) which may interfere with fulfilling the responsibilities of the position for which you are applying?

Yes  No If yes, please explain: \_\_\_\_\_

### EDUCATION List most recent first (Use supplemental sheet if necessary)

Name of School	Date Attended (MM / YY)	Degree	Year Earned
	From: / To: /		
	From: / To: /		
	From: / To: /		
	From: / To: /		

### EMPLOYMENT HISTORY Begin with your most current or last employer. If you have been unemployed during any time within the past ten years, list how you spent your time, e.g., student, homemaker, unemployed, etc.

<p>Organization Name: _____</p> <p>Address: _____  <small>STREET SUITE #</small></p> <p>_____  <small>CITY STATE ZIP</small></p> <p>Supervisor: _____  <small>NAME TITLE</small></p> <p>( ) _____ ext. _____ May we contact for references? <input type="checkbox"/> Yes <input type="checkbox"/> No  <small>PHONE</small></p> <p>Reason for leaving: _____</p> <p>Duties: _____</p>	<p>Position Title: _____</p> <p>_____</p> <p>Dates Employed (MM / YY):</p> <p>From: ____ / ____ To: ____ / ____</p> <p>Salary: Start: _____ Final: _____</p> <p><input type="checkbox"/> Full-time <input type="checkbox"/> Part-time: _____ hrs. / wk.</p>
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**EMPLOYMENT HISTORY (cont):**

<b>Organization Name:</b> _____ <b>Address:</b> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>STREET</span> <span>SUITE #</span> </div> <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>CITY</span> <span>STATE</span> <span>ZIP</span> </div> <b>Supervisor:</b> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>NAME</span> <span>TITLE</span> </div> (     )     ext. <b>May we contact for references?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <div style="display: flex; justify-content: space-between; font-size: small;"> <span>PHONE</span> </div> <b>Reason for leaving:</b> _____ <b>Duties:</b> _____	<b>Position Title:</b> _____ <hr/> <b>Dates Employed (MM / YY):</b> From: ____ / ____ To: ____ / ____ <b>Salary:</b> Start: _____ Final: _____ <input type="checkbox"/> <b>Full-time</b> <input type="checkbox"/> <b>Part-time:</b> _____ hrs. / wk.
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<b>Organization Name:</b> _____ <b>Address:</b> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>STREET</span> <span>SUITE #</span> </div> <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>CITY</span> <span>STATE</span> <span>ZIP</span> </div> <b>Supervisor:</b> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>NAME</span> <span>TITLE</span> </div> (     )     ext. <b>May we contact for references?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <div style="display: flex; justify-content: space-between; font-size: small;"> <span>PHONE</span> </div> <b>Reason for leaving:</b> _____ <b>Duties:</b> _____	<b>Position Title:</b> _____ <hr/> <b>Dates Employed (MM / YY):</b> From: ____ / ____ To: ____ / ____ <b>Salary:</b> Start: _____ Final: _____ <input type="checkbox"/> <b>Full-time</b> <input type="checkbox"/> <b>Part-time:</b> _____ hrs. / wk.
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**OTHER EXPERIENCE**

Please describe your leadership experience and/or training which may have bearing on the position for which you are applying:

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What age groups of children have you worked with? \_\_\_\_\_

What age groups do you prefer working with? \_\_\_\_\_

Explain briefly why you would like to work at The Silo Center: \_\_\_\_\_

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**AREAS OF EXPERTISE**

Please describe your abilities, or skill level, within the following activity areas:

**Adventure:** (ex: bicycling, climbing, hiking) \_\_\_\_\_

**Arts/Crafts:** (ex: drawing, jewelry, painting, photography, video, woodworking) \_\_\_\_\_

**Education:** (ex: math, reading, writing, grammar, history) \_\_\_\_\_

**Nature/Science:** (ex: computers, gardening, nature study) \_\_\_\_\_

**Performing Arts:** (ex: aerobics, dance, drums, piano, guitar, singing, drama) \_\_\_\_\_

**Sports:** (ex: archery, baseball, basketball, football, golf, street hockey, lacrosse, soccer, softball, tennis, track, cheerleading, tumbling, volleyball, ping pong) \_\_\_\_\_

**Water Activities** (ex. canoeing, rowing, swimming, fishing) \_\_\_\_\_

**Support Services:** (ex: food services, health services, maintenance, office skills) \_\_\_\_\_

**What church do you currently attend?** \_\_\_\_\_

**Pastor's name and phone number:** \_\_\_\_\_

**List any church activities in which you are currently involved:** \_\_\_\_\_

**What was the last book you read?** \_\_\_\_\_

**CERTIFICATIONS**

**Do you currently have** (within last 2 years) **CPR certification?**  Yes  No

If yes, please attach copy. **Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Do you currently have** (within last 3 years) **First Aid certification?**  Yes  No

If yes, please attach copy. **Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Do you currently have** (within past 3 years) **Life Guard certification?**  Yes  No

If yes, please attach copy. **Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Do you currently have** (within past 3 years) **Medication Administration certification?**  Yes  No

If yes, please attach copy. **Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Do you have any other certifications,** (ex. archery) **which may be applicable?**  Yes  No

If yes, please list and attach copies: \_\_\_\_\_ **Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**REFERENCES** At minimum, list three references. In addition to work references indicated in the employment history section, the following references may be contacted.

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_  
FIRST LAST

Occupation & Company: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET APT. # CITY STATE ZIP

Phone number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_  
FIRST LAST

Occupation & Company: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET APT. # CITY STATE ZIP

Phone number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_  
FIRST LAST

Occupation & Company: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET APT. # CITY STATE ZIP

Phone number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_  
FIRST LAST

Occupation & Company: \_\_\_\_\_

Address: \_\_\_\_\_  
STREET APT. # CITY STATE ZIP

Phone number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

**CRIMINAL HISTORY** Because of the tremendous responsibility The Silo Center has to its children and community, the following information is needed from all applicants and employees regarding charges and convictions.\* A record on conviction is not an absolute bar from employment; however, failure to complete this form accurately and completely shall constitute sufficient cause for disqualification from consideration for employment or shall be cause for consideration of dismissal if employed and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time they initially completed this form. Please read carefully, and answer every question. Please print clearly.

Have you ever been convicted of a minor offense other than traffic violation(s)?  Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been charged with or convicted of a felony?  Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been charged with or convicted of a sex or drug-related offense?  Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

CRIMINAL HISTORY (cont):

Have you ever been charged with or convicted of a dangerous crime against children as defined in A.R.S. 13.604.01?\*

Yes  No If yes, please explain: \_\_\_\_\_

If you answered "yes" to any of the previous questions, please fill in the information below and attach a letter of explanation.

Conviction Charge: \_\_\_\_\_ Date of Conviction: \_\_\_\_/\_\_\_\_/\_\_\_\_

Court of Conviction: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Amount of Fine: \$ \_\_\_\_\_ Length of Jail Term: \_\_\_\_\_ Remarks: \_\_\_\_\_

Conviction Charge: \_\_\_\_\_ Date of Conviction: \_\_\_\_/\_\_\_\_/\_\_\_\_

Court of Conviction: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Amount of Fine: \$ \_\_\_\_\_ Length of Jail Term: \_\_\_\_\_ Remarks: \_\_\_\_\_

As an applicant for employment with The Silo Center of New Hope Church, I agree to the following:

- I certify that the answers given by me are true and correct.
- I am aware that The Silo Center may, without liability, disqualify me from employment or terminate my employment because of false statements or omissions made in this application.
- I authorize the entities and individuals named in this application to give relevant information regarding my application to The Silo Center, including but not limited to, my employment history, work habits, and educational achievements.
- I understand that my employment will be "at will" which means that the employment may be terminated by me or The Silo Center at any time, without cause.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If applicant is a minor, signature of Parent/Guardian: \_\_\_\_\_

**NOTICE OF NON-DISCRIMINATION:** The Silo Center is an Equal Opportunity Employer. Our employment policies are non-discriminatory regarding age, sex, color, race national origin or disabled status for qualified applicants. We are exempt from the Title VII requirements as it pertains to our religious beliefs and tenants.

\* Conviction means the final judgment or a finding of guilty, a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken.

\*\* ARS §13.3716 requires applicants to give notice of any conviction for dangerous crimes against children. These crimes are defined in ARS §13.604.01 as second-degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse, if any of these crimes are committed against a minor under 15 years of age.