



**BOYS & GIRLS CLUBS**  
OF GREATER  
NORTHWEST INDIANA

# Application for Employment

Boys & Girls Clubs of Greater Northwest Indiana is an equal opportunity employer.

8392 Mississippi St. 2<sup>nd</sup> Floor • Merrillville, IN • 46410  
219.881.1060 • bgcgreaterwi.org

Employment Desired:						
Position Desired:				Hourly Rate Desired:		
Are you seeking:      Full Time      Part Time      Temp/Seasonal				Date you Can Start:		
Personal Information: (Incomplete information could disqualify you from further consideration)						
Name: (First, Middle, Last)					Today's Date:	
Address:				City:		
State:	Zip:	Home Phone:		Cell Phone:		
Email Address:						
Are you eligible to work in the United States?					Yes	No
Are you at least 18 years of age or older? (If no, you may be required to provide authorization to work.)					Yes	No
Are you able to perform the essential functions of the job, which you are applying, with or without a reasonable accommodation? (If you are unsure of the essential functions, please ask to review a job description.)					Yes	No
Please indicate the days & hours you are available to work below:						
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From						
To						
Referral Source:						
How did you hear about us?      Walk-In      Advertisement      Referral      Other      Source:						
Have you ever worked for this organization? If yes, please provide dates, supervisors, etc:					Yes	No
Do you know anyone who works for this organization? If yes, please provide name and length of time known for each:					Yes	No
Do you have any relatives currently working for this organization? If yes, Please provide name and relationship for each:					Yes	No
Background:						
Are you currently Employed?					Yes	No
If yes, may we contact your present employer?					Yes	No
Have you ever been terminated from employment or asked to resign by an employer? If yes, please provide organization name(s) and contact(s):					Yes	No
Have you ever been convicted of a crime that has not been expunged by a court? (A conviction will not necessarily disqualify you for employment. Rather, such factors as age, date of conviction, seriousness, and nature of the crime will be considered.) If yes, please provide dates and location for all convictions:					Yes	No

## Employment History

Include your last three positions (or your last ten (10) years of employment history), including periods of unemployment, starting with the most recent and working backwards in time. (Incomplete information could disqualify you from future consideration.)

Current or Most Recent Employer:			
Employed From:	Employed to:	Starting Salary:	Ending Salary:
Company Name:		May we contact?    Yes    No	
Address:			
City:	State:	Zip:	Phone Number:
Position Title:			
Supervisor:		Supervisor Title:	
Nature of the work performed and position responsibilities:			
Reason for leaving:			
Second Most Recent Employer:			
Employed From:	Employed to:	Starting Salary:	Ending Salary:
Company Name:		May we contact?    Yes    No	
Address:			
City:	State:	Zip:	Phone Number:
Position Title:			
Supervisor:		Supervisor Title:	
Nature of the work performed and position responsibilities:			
Reason for leaving:			
Third Most Recent Employer:			
Employed From:	Employed to:	Starting Salary:	Ending Salary:
Company Name:		May we contact?    Yes    No	
Address:			
City:	State:	Zip:	Phone Number:
Position Title:			
Supervisor:		Supervisor Title:	
Nature of the work performed and position responsibilities:			
Reason for leaving:			

## Education

	Name of School	City/State	No. Year Attended	Subjects/Major	Degree Y/N
High School					
College or University					
Graduate School					
Trade/Business School					

### Licenses or Certifications

Name/Type:	Issued by:	Issue Date:	Expiration Date:
Name/Type:	Issued by:	Issue Date:	Expiration Date:
Name/Type:	Issued by:	Issue Date:	Expiration Date:

Special skills, experience and/or training that would enhance your ability to perform the position applied for.

Equipment and/or computer skills:

References: (Provide the information below of three people, (2 professional/academic, 1 personal), not related to you, whom you have known at least three years.)

Name:	Personal Professional	Email/Phone:	Occupation:	# years known:
Name:	Personal Professional	Email/Phone:	Occupation:	# years known:
Name:	Personal Professional	Email/Phone:	Occupation:	# years known:

# Acknowledgment

It is the policy of Boys & Girls Clubs of Greater Northwest Indiana to provide equal employment opportunity to all qualified persons without regard to citizenship, race, color, creed, religion, gender, sexual orientation, age, national origin, marital status, genetic information, disability, or veteran status. This application will be given every consideration, but its receipt does not imply that there are any open positions or that the applicant will be employed. Only applicants meeting the minimum requirements for a position as determined by the organization will be considered for employment. Should more than one qualified person make application, the company reserves the right to select the applicant that, in its opinion, possesses the best qualifications.

In making this application for employment, an investigative consumer report may be prepared whereby information is obtained through personal interviews with neighbors, friends, or other acquaintances. Such an inquiry would include information as to character, general reputation, personal characteristics, and mode of living of the applicant. An applicant has the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

## Authorization

*Please read carefully before signing*

I authorize investigation of all statements contained in this application (if I am considered for employment) and hereby authorize previous employers, personal references named, or any other person or persons to whom the organization may refer, to give any and all information regarding my background if requested.

If employed, I agree to engage in no outside activity which would involve a material conflict of interest with, or which could, as determined by the organization, reflect adversely on the organization.

If employed, I agree to maintain confidentiality regarding any information concerning the organization that may come to my knowledge. Further, I agree to comply with all of the policies and regulations of the organization as set forth in the organization's employee handbook or other communications distributed to all employees.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the organization to hire me. I understand that if employment is offered to me, either verbally or in writing, such offer does not constitute a contract of employment. I understand that if I am employed by the organization my employment will be for no definite period of time and that my employment can be terminated at any time and for any reason, with or without cause and without prior notice, at the option of either the organization or myself. I also understand that this status can only be altered by a written contract of employment, specific to all material terms, that is signed by an authorized officer of the organization.

I attest with my signature below that I have read all of the above statements and understand the same and all statements made by me are true and accurate to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that any false statements or material omissions may be grounds for refusal to hire, or for immediate dismissal. I certify that I am at least 18 years of age and am legally authorized to work in the United States. Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between myself and the organization for either employment or for the providing of any benefit.

I understand that as a condition of this application and any employment, I may be required to submit to testing for the presence of illegal drugs. I hereby consent to such testing. I further acknowledge that no promise or guarantee is binding upon the organization unless made in a written contract of employment as described above.

*By typing your name in the signature line and checking the box, you agree that all statements you provided are true and any falsifying information could result in termination if employed.*

*Checking this box indicates you agree that your typed name in the Signature field constitutes a legal signature.*

Applicant Signature:	Date:
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**THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.**

Submit your application by emailing it as an attachment to: [employmentopportunities@bgcgreaterwi.org](mailto:employmentopportunities@bgcgreaterwi.org) or returning to the administrative office located at: 8392 Mississippi St., 2nd Floor, Merrillville, IN 46410



**BOYS & GIRLS CLUBS**  
OF GREATER  
NORTHWEST INDIANA

THIS AREA FOR INTERNAL USE ONLY

Staff

Volunteer

Requester: \_\_\_\_\_

## Background Check Authorization and Liability Release

I hereby authorize Boys & Girls Clubs of Greater Northwest Indiana to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material to my qualifications for employment and/or volunteering. If hired as an employee and/or a volunteer by Boys & Girls Clubs of Porter County, I also understand Boys & Girls Clubs of Greater Northwest Indiana may check all of the above entities on a yearly/quarterly basis or during the process of determining a promotion using this authorization form.

I release Boys & Girls Clubs of Greater Northwest Indiana and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claims, or law suits in regard to the information obtained from any and all of the above referenced sources.

I understand that any offer of employment and/or volunteerism is contingent on a satisfactory background investigation. I also understand that this form will be kept in my permanent file if I am employed or if I volunteer. I certify that the following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge.

Last Name	First Name	Middle Name
Maiden or Alias Name: Last Name	First Name	Middle Name
Address		City, State, Zip
Social Security Number	Phone (Include Area Code)	Date of Birth (MM/DD/YYYY)
Email Address		

*\*Date of birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes.*

I have read this Authorization and Liability Release and understand and agree with each of its terms.

Checking this box indicates you agree that your typed name in the signature field constitutes a legal signature.

Applicant Signature	Date
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If applicant is under 18 years of age, a parent/guardian signature is also required.

Checking this box indicates you agree that your typed name in the signature field constitutes a legal signature.

Parent/Guardian Signature	Relationship to Minor	Date
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## PRE-EMPLOYMENT DRUG & ALCOHOL SCREENING

### CONSENT AND RELEASE FORM

I hereby consent to submit to a drug and/or alcohol screen and to furnish a specimen sample for analysis, as shall be determined by Boys & Girls Clubs of Greater Northwest Indiana in order to meet with their policy regarding the selection of applicants for employment.

I further authorize and give full permission to have Boys & Girls Clubs of Greater Northwest Indiana and/or its authorized agents and physicians to send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to Boys & Girls Clubs of Greater Northwest Indiana. I further agree to and hereby authorize the release of the results of said tests to Boys & Girls Clubs of Greater Northwest Indiana.

I further agree to hold harmless Boys & Girls Clubs of Greater Northwest Indiana and its authorized agents and physicians from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with Boys & Girls Clubs of Greater Northwest Indiana's consideration of my application of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

*Checking this box indicates you agree that your typed name in the Signature field constitutes a legal signature.*

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Applicant Name Print

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Applicant Name Signature

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## EQUAL EMPLOYMENT OPPORTUNITY

### VOLUNTARY SELF-IDENTIFICATION FORM

Boys & Girls Clubs of Greater Northwest Indiana is committed to a diverse workforce. It is our policy to provide equal employment opportunity to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or veteran status, or any other protected category.

Invitation to Self-Identify: Boys & Girls Clubs of Greater Northwest Indiana is subject to certain non-discrimination United States governmental recordkeeping and reporting requirements, which require the employer to invite employees to voluntarily self-identify their gender and race or ethnicity.

Submission of this information is strictly VOLUNTARY, and refusal to provide it will not subject you to any adverse treatment. This information will not affect the decision regarding your application for employment. Your response will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders and regulations.

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Name (print)

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Date (mm/dd/yyyy)

**Gender** (Please select one of the below options)

Male

Female

**Race or Ethnicity:** (Please check one of the descriptions below corresponding to the ethnic group with which you identify)

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

Two or more races (Not Hispanic or Latino): A person who identifies with more than one of the above five races.