

# After School Academics & Arts Program Application for Employment

*106 N. 38th Ave • Hattiesburg, Ms 39402  
Telephone 601-336-5501 • Fax 888-840-6993*

**Position Desired** \_\_\_\_\_ **Date Applied** \_\_\_\_\_

**Full-Time**                       **Part-Time**                       **Stipend**                       **Volunteer**

## Personal

Name \_\_\_\_\_ D.O.B. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Social Security No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
FIRST MIDDLE LAST

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Have you ever been convicted of a felony or a misdemeanor?  Yes  No If yes, explain in writing \_\_\_\_\_

## Education and Training

Type of School	Name/Location	Years Completed	Honors Received: Diploma/Degree	Course of Study
<b>Jr. High/ High School</b>				
<b>Trade, Business, or Technical</b>				
<b>College or University</b>				
<b>Graduate or Professional</b>				

## Employment

*Can substitute a resume for this section*

**Present Employer** \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Position(s) held \_\_\_\_\_

Employment dates: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Pay \$ \_\_\_\_\_ Ending Pay \$ \_\_\_\_\_

Supervisor/Manager \_\_\_\_\_ May We Contact  Yes  No

Reason for Leaving \_\_\_\_\_

Description of Primary Responsibilities \_\_\_\_\_

**Past Employer** \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Position(s) held \_\_\_\_\_

Employment dates: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Pay \$ \_\_\_\_\_ Ending Pay \$ \_\_\_\_\_

Supervisor/Manager \_\_\_\_\_ May We Contact  Yes  No

Reason for Leaving \_\_\_\_\_

Description of Primary Responsibilities \_\_\_\_\_

**Past Employer** \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 Position(s) held \_\_\_\_\_  
 Supervisor/Manager \_\_\_\_\_ May We Contact  Yes  No  
 Employment dates: Starting \_\_\_\_\_ Ending \_\_\_\_\_ Starting Pay \$ \_\_\_\_\_ Ending Pay \$ \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_  
 Description of Primary Responsibilities \_\_\_\_\_

### Personal References

**First Reference** \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Length of Time Known \_\_\_\_\_ E-Mail \_\_\_\_\_ Relationship to you \_\_\_\_\_  
**Second Reference** \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Length of Time Known \_\_\_\_\_ E-Mail \_\_\_\_\_ Relationship to you \_\_\_\_\_  
**Third Reference** \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Length of Time Known \_\_\_\_\_ E-Mail \_\_\_\_\_ Relationship to you \_\_\_\_\_

### Agreement

If you are hired by ASAAP, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

**AUTHORIZATION**

I certify the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by ASAAP.

I understand that any employment is conditioned on a background check. I authorize ASAAP to thoroughly investigate all statements contained in my applications and/or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and all general reputation to ASAAP, without giving me prior notice of such disclose. In addition, I release ASAAP, any former employers and all reference listed above from any and all claims, demands and liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained or conveyed in this application is any interview or intended to create an employment contract. I further understand that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or ASAAP. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon ASAAP unless made in writing.

If I am offered employment, I agree to submit to a medical examination and drug test before starting work. If employed, I agree to submit to a medical examination or drug test at any time deemed appropriate by ASAAP and as permitted by law. I consent to such examinations and test, and I request that the examining doctor disclose to ASAAP the results of the examination, which results shall remain confidential and segregated from my personal file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the ASAAP and Alcohol Policy.

If hired, I agree to abide by all ASAAP work rules, policies and procedures. ASAAP retains the right to revise policies or procedure, in whole or in part, at any time.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_  Yes, I have read and agree with the statement above.