

# DISCOVER AFTER SCHOOL EMPLOYMENT APPLICATION

Position(s) Applied for: \_\_\_\_\_

Date of Application: \_\_\_\_\_

## INSTRUCTIONS

- Please ensure that all the questions on the application are completed.
  - A resume cannot be substituted for a completed application.
- If you wish to provide additional information, you may attach a resume.

## EQUAL OPPORTUNITY EMPLOYER

In adherence with state and federal laws which prohibit discrimination, we consider applicants without regard to race, color, religion, sex, national origin, age, or any other protected classification.

## PLEASE PRINT

### PERSONAL INFORMATION

LAST NAME

FIRST NAME

MIDDLE NAME

ADDRESS

PHONE NUMBER

EMAIL ADDRESS

Have you ever filed an application with Discover After School?

Yes  No

If yes, please provide the date of application: \_\_\_\_\_

Have you ever been employed by Discover After School?

Yes  No

If yes, please provide dates of employment: \_\_\_\_\_



# DISCOVER AFTER SCHOOL EMPLOYMENT APPLICATION

## EMPLOYMENT HISTORY

Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
May we contact your present employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Can you travel if the job requires it?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Are you available to work?	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Temporary
What is the earliest date you are available to start?	_____			

Describe your work experience. Start with your current or most recent position. Include military service and volunteer activities.

<b>1. EMPLOYER:</b>		<b>2. EMPLOYER:</b>	
ADDRESS		ADDRESS	
JOB TITLE		JOB TITLE	
SUPERVISOR'S NAME AND TELEPHONE NUMBER		SUPERVISOR'S NAME AND TELEPHONE NUMBER	
DATES EMPLOYED FROM:	TO:	DATES EMPLOYED FROM:	TO:
DUTIES PERFORMED		DUTIES PERFORMED	
REASON FOR LEAVING		REASON FOR LEAVING	
<b>3. EMPLOYER:</b>		<b>4. EMPLOYER:</b>	
ADDRESS		ADDRESS	
JOB TITLE		JOB TITLE	
SUPERVISOR'S NAME AND TELEPHONE NUMBER		SUPERVISOR'S NAME AND TELEPHONE NUMBER	
DATES EMPLOYED FROM:	TO:	DATES EMPLOYED FROM:	TO:
DUTIES PERFORMED		DUTIES PERFORMED	
REASON FOR LEAVING		REASON FOR LEAVING	

# DISCOVER AFTER SCHOOL EMPLOYMENT APPLICATION

EDUCATION				
SCHOOL	NAME & LOCATION	YEARS COMPLETED	DIPLOMA/DEGREE	GRADUATED
HIGH SCHOOL				
JUNIOR/ COMMUNITY COLLEGE				
COLLEGE AND/OR UNIVERSITY				
GRADUATE AND/OR PROFESSIONAL				
OTHER ED. VOC. TECH SCHOOLS				

ADDITIONAL INFORMATION
<p><b>OTHER QUALIFICATIONS:</b> Summarize special job-related skills and qualifications. These can include, but are not limited to languages spoken fluently, equipment/machinery licenses held, specialized training and extra-curricular activities.</p>
<p><b>ASSOCIATIONS:</b> List any professional, trade or civic activities and/or offices you have held. You may exclude activities and or offices that would reveal gender, race, religion, national origin, age, and any other protected status under the Equal Opportunity Employment Act.</p>



# DISCOVER AFTER SCHOOL EMPLOYMENT APPLICATION

## CRIMINAL HISTORY

Have you ever been convicted of a crime, jail sentence or entered in a plea of nolo contendere (no contest)?

Yes\*

No

*\*If yes, you must provide details for each charge.*

Conviction will not necessarily disqualify an applicant from employment.

## REFERENCES

*List three references who have knowledge of your work ethic, work-related activities and/or school performance.*

NAME	TITLE	PHONE NUMBER
1.		
2.		
3.		

## APPLICANT AGREEMENT

- I certify that the information provided in this application is true and complete.
- I authorize investigation of all statements contained in this application, the results of which may be used in the hiring decision.
- In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.
- I understand that if hired, it is my responsibility to show proof of citizenship or immigration status.
- I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature. This means that I may resign at any time and that the Discover After School, Inc. may discharge me at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.
- I understand, also, that I am required to abide by all rules and regulations of the employer.

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

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



# DISCOVER AFTER SCHOOL EMPLOYMENT APPLICATION

## EQUAL EMPLOYMENT OPPORTUNITY SURVEY

Discover After School is committed to providing equal employment opportunities for all prospective employees. In responding to this survey, you will be helping us to assess our equal employment efforts as well as help us to comply with state and federal laws pertaining to Equal Employment Opportunities. Completion of this survey is **voluntary**. The information gathered will not be used to evaluate your application.

Name (optional): \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Please check all that apply to you:

Male

Female

American Indian or Alaskan Native

Asian

Black or African American

Hispanic

Native Hawaiian or Pacific Islander

White

Other (Please specify) \_\_\_\_\_

**Applications can be submitted by email, in person, or by mail.**

[Work@DiscoverAfterSchool.com](http://Work@DiscoverAfterSchool.com) | 7635 Ashley Park Court, Suite D, Orlando, FL 32835