



**BOYS & GIRLS CLUBS
OF THE GULF COAST**

Attn: Department of Human Resources
11975-B Seaway Road
Gulfport, MS 39503

The Boys & Girls Clubs of the Gulf Coast, Inc. ("BGCGC") does not discriminate on an unlawful basis with regard to race, national origin, color, religion, sex, disability, or veteran's status.

How to obtain an Employment Application Form:

The Employment Application Form can be obtained 3 ways: (a) electronically by visiting our web site at www.bgcgulfcoast.org/jobs.php and click on *Download Employment Application*, (b) visiting any of the Boys & Girls Clubs of the Gulf Coast Units, (c) or by visiting the Department of Human Resources at the above address. Office hours are Monday to Friday 8:00 am to 5:00 pm. Positions are posted on our website when applicants who are not existing employees of BGCGC are to be sought.

Information for Completing the Employment Application Form

- Applications are accepted for current vacancies ONLY. Each position sought must be listed on the application.
- Complete the application form in its entirety.
- PRINT LEGIBLY or TYPE.***
- All information provided must be correct. Any false information may be cause for denial of employment or dismissal in the event of employment.
- All applications must be signed by the applicant and dated. Applicants submitting applications electronically will be required to execute a signature page of the application.

Résumés

Résumés may be submitted as an attachment to the official Employment Application; however, **the application form must be completed in its entirety. "See résumé" or similar responses will not be considered.**

Closing Date

The posting period for each posted position is specified in the posting, and is one of the following: 90 days from date of first posting; receipt of a specified number of applications from applicants whose applications reflect they meet all of the requirements of the posting; or the earlier or later of these.

Ways to submit your application

- Email: jobs@bgcgulfcoast.org
- Fax: (228) 896-3720
- U.S. Mail: Boys & Girls Clubs of the Gulf Coast
Attn: Department of Human Resources
11975-B Seaway Road
Gulfport, MS 39503
- Personal Delivery: 11975-B Seaway Road, Gulfport, MS 39503
**APPLICATIONS ARE ACCEPTED BETWEEN
8:00 am TO 3:00 pm.**

FOR OFFICE USE ONLY	
Select:	<input type="checkbox"/>
Non-Select:	<input type="checkbox"/>
Start Date:	_____
Salary:	\$ _____
Date & Initials:	_____



A

Application for Employment

Position(s) Applied For: _____
Title Date

PERSONAL

Name: _____					
Title	Last	First	M.I.	Social Security Number	
Present Address _____					
No.	Street	City	State	Zip Code	
Telephone Numbers: Home: (____) _____ Work: (____) _____ Email: _____					
Note: If the position you are applying for requires you to transport children, you must have a clean driving record and must be insurable by our insurance carrier.					
Drivers License No.: _____		State issued: _____		Expiration Date: _____ Class: _____	

EMERGENCY CONTACT INFORMATION

Name _____					
Title	Last	First	M.I.	Relationship	
Present Address _____					
No.	Street	City	State	Zip Code	
Telephone Numbers: Home: (____) _____ Work: (____) _____ Other: (____) _____					

EMPLOYMENT INFORMATION

Type of position desired:	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Summer/Seasonal	<input type="checkbox"/> Other _____			
Location Preference:	<input type="checkbox"/> Biloxi	<input type="checkbox"/> D'Iberville	<input type="checkbox"/> Gulfport	<input type="checkbox"/> Pass Christian	<input type="checkbox"/> Poppo's Ferry	<input type="checkbox"/> No Preference	<input type="checkbox"/> Main Office
Have you ever worked at the Boys & Girls Clubs of the Gulf Coast?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, when? Where? Reason for leaving?				

Do you have any relatives presently working at the Boys & Girls Clubs of the Gulf Coast, on the board of directors, or as a volunteer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, state name, relationship, and, if applicable, the club where your relative works.				

Are you legally authorized to work in the United States?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
(Verification of your legal right to work in the United States will be required.)							

Applicant's Name				
	Title	Last	First	M.I.

EDUCATION

Type of School	Name and Location	Graduated	Number of Years Completed	Degree
High School/GED		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Post Graduate		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Business or Trade		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other		<input type="checkbox"/> Yes <input type="checkbox"/> No		

CRIMINAL BACKGROUND INFORMATION

Have you ever been convicted of, plead guilty to, plead no contest to, or paid a fine for any criminal offense (including under the Uniform Code of Military Justice)?
 Yes No It is not necessary to include parking or speeding tickets unless you are applying for a position that requires driving. (Use of information about conviction is limited to convictions that are job-related; a record of conviction does not necessarily disqualify an applicant from employment.) If yes, describe in full, including date and location of court/criminal records.

If hired, can you certify that you are not awaiting trial on nor have you ever been convicted of or admitted committing any of the following criminal offenses in this state or similar offenses in another state or jurisdiction as defined in Section 45-33-23, Mississippi code of 1972 or Section 43-21-105 of the Youth Court Law?
 Yes No

<p>a. Sexual abuse of a minor</p> <p>d. Kidnapping</p> <p>g. Sexual exploitation of a minor</p> <p>i. Commercial exploitation of a minor</p> <p>l. Robbery</p> <p>o. Molestation of a child</p> <p>q. Felony offences involving distribution of marijuana or dangerous or narcotics drugs</p> <p>r. A dangerous crime against children or aggravated assault committed against a minor resulting in a serious injury or committed by the use of a deadly weapon or dangerous instrument</p>	<p>b. Incest</p> <p>e. Arson</p> <p>h. Contributing to the delinquency of a minor</p> <p>j. Manslaughter</p> <p>m. Child Abuse</p> <p>p. Aggravated Assault</p>	<p>c. First or second-degree murder</p> <p>f. Sexual Assault</p> <p>k. Burglary</p> <p>n. Sexual conduct with a minor</p>
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Yes, I can certify if hired that I am not awaiting trial and I have never been convicted of any of the above.

SKILLS & QUALIFICATIONS

List special qualifications and skills you possess for the position for which you have applied. **Upon request, candidates must provide documentation of any attainments claimed on the application to include: certificates, licenses, visas, degrees, etc.**

List any professional license or certificates that are currently valid	State or other licensing authority	Years of current license or certificate	Expiration date



Applicant's Name				
	Title	Last	First	M.I.

WORK HISTORY

List in order, present to past, each position you have held over the past ten years. You may also add other relevant experience. If additional space is needed, attach a supplementary sheet.

1	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					
2	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					
3	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					

D

Applicant's Name _____			
Title	Last	First	M.I.

WORK HISTORY CONTINUED

4	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					
5	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					
6	Dates of employment (month, year)		Exact title of position:		
	From:	To:			
Starting Salary	\$	Hr/Yr	Average hours per week:	Number of employees you supervised:	Name of employer and address:
Ending Salary	\$	Hr/Yr	Name and title of immediate supervisor:		
Area Code & Phone Number:		Reason for wanting to leave:		May we contact your this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Description of duties, responsibilities, and accomplishments:					

Applicant's Name _____			
Title	Last	First	M.I.

MISCELLANEOUS

Is any additional information relative to social security number, change of name, nickname, use of an assumed name necessary to enable a check on your work and education record? Yes No If yes, please supply information:

Have you ever been disciplined, counseled, warned, asked to resign, or discharged at any organization for which you have worked, or have you resigned to avoid discharge at any such organization? Yes No If you answered "yes", explain. Use extra sheets if necessary.

Applicant's Name _____

Title Last

First

M.I.

F

APPLICANT STATEMENT

If offered employment and at the discretion of BGCGC, I agree to submit to a drug test and medical examination by a physician designated by BGCGC, and agree to comply with BGCGC's policy on a drug-free workplace.

I understand that if I am employed, employment with BGCGC will be "at will"

At-will employment means that either BGCGC or I may terminate the employment relationship at any time with or without cause and with or without notice, and that BGCGC may change my terms and conditions of employment with or without cause or notice. No one other than the Executive Director has the authority to alter this at-will agreement, and any such agreement must be in writing and must be signed by the Executive Director and me.

PRE-EMPLOYMENT DRUG SCREENING CONSENT

I understand that all applicants who have received an "offer to hire" from BGCGC are required, as a condition of employment, to take a drug screening test. If given a "conditional offer of hire", I will consent freely and voluntarily to BGCGC's request for a urine sample for the purpose of determining the presence of illegal drugs or other controlled substances.

I further understand that either failure to submit to a urine sample or if the analysis reveals the presence of drugs or other controlled substances, the "offer to hire" is immediately revoked.

I hold harmless the Boys & Girls Clubs of the Gulf Coast, Inc., its officers, agents, employees, directors, volunteers and members as well as the testing agency from any claims I may have against any or all of them arising out of the drug screening test and its use to determine whether I may be employed by the organization.

I have read this form in full and understand the above statements and that an "offer to hire" is contingent upon the conditions set forth herein.

READ CAREFULLY BEFORE SUBMITTING THIS APPLICATION

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment will be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

In order to safeguard the well being of the youth served by our organization, I authorize the Boys & Girls Clubs of the Gulf Coast to verify all information provided by me on this application or in support of my efforts to obtain employment with the organization. I hereby authorize any prior employer listed on this application, except as noted, and/or any educational entity or person on this application to disclose to the organization any and all letters, reports and other information related to my work or educational record, without giving me prior notice of such disclosure. In addition, I hereby release the organization, my former employers, all educational entities listed on this application and all other persons or organizations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that it is a requirement of BGCGC that all employees who work with or have contact with children must have a background check. I understand that the background check will be used to check criminal history records.

I understand that nothing contained in this application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create a contract between the organization and me. In addition, I understand and agree that if I am employed, my employment is "at-will" which means employment is for no definite or determinable period and may be terminated at any time with or without cause or notice, at the option of the organization or myself. I also understand that no promises or representations contrary to the foregoing are binding on the organization unless made in writing and signed by BGCGC's Executive Director.

Date: _____

Signature: _____

Submit via E-mail (as an attachment) to:	jobs@bgcgulfcoast.org
Or Fax to:	(228) 896-3720
Or first class mail or In Person (between the hours of 8:00 am to 3:00 pm):	Boys & Girls Clubs of the Gulf Coast Attn: Human Resources Department 11975-B Seaway Road Gulfport, MS 39503



BOYS & GIRLS CLUBS
OF THE GULF COAST



Applicant's Name _____			
Title	Last	First	M.I.

SECURITY BACKGROUND CHECK

DISCLOSURE TO APPLICANT/EMPLOYEE AND CONSENT TO CONSUMER BACKGROUND INVESTIGATION

In connection with your Application for Employment/continued employment, we may conduct an investigation into your consumer credit history, character, general reputation, personal characteristics, and/or mode of living, including criminal records, by obtaining a consumer report from one or more consumer reporting agencies, including credit-reporting agencies. This investigation may require that you provide your fingerprints and that your consent to the investigation includes your agreement to provide your fingerprints if requested and to have them used to obtain information as part of the investigation. The purpose of this notice is to make you aware of this investigation and to explain your rights regarding this investigation, in accordance with the Fair Credit Reporting Act, as amended by the Consumer Credit Reporting Reform Act of 1996, 15 U.S.C. § 1681-1681u (the "Act").

1. The consumer information obtained will be used only for the permissible purpose of verifying your suitability for employment or continued employment at Boys & Girls Clubs of the Gulf Coast (BGCGC), and not for any other purpose. It will not be used in violation of any federal, state, or local equal employment opportunity law or regulation.
2. You are entitled to learn the nature and substance of the information in your consumer report, which BGCGC receives, by sending a written request to The Director of Human Resources. The information will be provided within five business days of receipt of your request.
3. If you are denied employment or continued employment because of your consumer report, BGCGC will provide to you: (a) a copy of your report, and (b) a written description of your rights under the Act, including your right, within 60 days of BGCGC's decision, to obtain a free copy of your consumer report from the consumer-reporting agency.
4. Please read the following Consent form carefully. If you consent to this investigation, sign where indicated. You will be given a copy of this Consent for your records.

CONSENT TO CONSUMER BACKGROUND INVESTIGATION

I consent to an investigation by and authorize the Boys & Girls Clubs of the Gulf Coast (BGCGC) or any person or consumer reporting agency it may employ for this purpose, to obtain my consumer report, including my credit history, character, general reputation, personal characteristics, and/or mode of living, including any criminal records. I understand that this investigation may require that I provide my fingerprints and that my consent to the investigation includes my agreement to provide my fingerprints if requested and to have them used to obtain information as part of the investigation. I release BGCGC, its employees, and any and all such persons and consumer reporting agencies contacted from any and all liability for any damage flowing from the disclosure of this information and BGCGC's actions taken thereon.

Name: _____

Title
Last
First
M.I.
Social Security Number

Present Address _____

No.
Street
City
State
Zip Code

Telephone Numbers: Home: (____) _____ Work: (____) _____ Email: _____

Date of Birth: _____

Driver's License: _____ Issuing State: _____ Expiration Date: _____

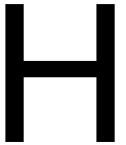
 Applicant's Signature

 Date

FOR OFFICIAL USE ONLY			
Date Report Requested	Initials	Date Report Received	Initials
Location		Position	

Voluntary Self-Identification Affirmative Action Information

This form will be detached from the employment application. It is not part of the employment process.



An Equal Opportunity Employer

The Boys & Girls Clubs of the Gulf Coast (BGCGC) provides equal opportunity for all qualified applicants and employees, without regard to race, color, religion, sex, national origin, age, disability, veteran status, gender identity, political preference, sexual orientation, marital status, citizenship, or other status protected by law or regulation. The BGCGC prohibits discrimination in any aspect of employment, including hiring, promotion, demotion, transfer, layoff or termination, rates of pay, or selection for training. The BGCGC also undertakes affirmative action programs to facilitate full and equal participation of all employees in the opportunities available within BGCGC.

Position: _____ Date: _____

Name: _____ Social Security Number: _____
Last, First MI

The BGCGC is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the BGCGC invites employees to voluntarily self-identify their race/ethnicity and gender. Your response will facilitate the BGCGC's equal employment opportunity efforts and assure that BGCGC records reflect accurate information. Submission of this information is voluntary and refusal to provide it will not subject you to adverse treatment. Employment decisions will not be based on whether or not you provide the information, and this information will not become part of your applicant file. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. Where reported, data will not identify any specific individual. Please check one box in response to each section (1 & 2). (See definitions below for assistance.)

Section	Definition
1. Race/Ethnic Groups	
<input type="checkbox"/> Hispanic or Latino	Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
<input type="checkbox"/> White	(Not Hispanic or Latino) Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.
<input type="checkbox"/> Black or African American	(Not Hispanic or Latino) Persons having origins in any of the black racial groups of Africa.
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	(Not Hispanic or Latino) Persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> Asian	(Not Hispanic or Latino) Persons 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.
<input type="checkbox"/> American Indian or Alaskan Native	(Not Hispanic or Latino) Persons having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
<input type="checkbox"/> Two or More Races	(Not Hispanic or Latino) All persons who identify with more than one of the above five races.
2. Sex	
<input type="checkbox"/> Male	
<input type="checkbox"/> Female	

REFERENCE FORM

Use this form to secure a reference from a close friend or colleague, preferably a mature adult. A reference must be someone who has known you for at least one year and has observed your work ethic. The individual cannot be a relative.

TO BE COMPLETED BY APPLICANT (PLEASE PRINT)

Name: _____
Last, First MI Social Security Number

Waiver or right to access: I, the undersigned, hereby voluntarily waive any right or privilege by Public Law 93-380 to inspect or challenge the content and comments expressed in this reference. I expect that the observations made shall remain confidential between the reference and Boys & Girls Clubs of the Gulf Coast.

Applicant's signature _____ Date _____
(The signing of this waiver is voluntary. It is not required as a condition of employment)

TO BE COMPLETED BY REFERENCE (PLEASE PRINT)

INSTRUCTIONS: The person named above is applying for employment with the Boys & Girls Clubs of the Gulf Coast. It is essential that you be candid in your evaluation. After completing this form, if **mailing:** please place it in an envelope with proper postage, seal the envelope, and sign it across the seal, **Or** return it to the applicant who will forward it, unopened, to the Human Resource Department of the Boys & Girls Clubs of the Gulf Coast, **Or Fax** the form to the number listed below. Thank you.

How long have you known the applicant? _____ What is your relationship with the applicant? _____

Please check the appropriate box:

	Excellent	Good	Average	Poor	Unknown
Moral Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend that we accept this applicant? Yes No Questionable

Please explain your recommendation or add any further comments:

Your Name: _____ (Please Print Clearly) Position/Title: _____

Contact Number with Area Code: (_____) _____

Address: _____
Street City State Zip Code

Signed: _____ Date Signed: _____

Mail to: Boys & Girls Clubs of the Gulf Coast, Attn: Human Resource Department, 11975-B Seaway Road, Gulfport, MS 39503, or
Fax to: (228) 896-3720

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How long have you known the applicant? _____ What is your relationship with the applicant? _____

Please check the appropriate box:

	Excellent	Good	Average	Poor	Unknown
Moral Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend that we accept this applicant? Yes No Questionable

Please explain your recommendation or add any further comments:

Your Name: _____ (Please Print Clearly) Position/Title: _____

Contact Number with Area Code: (_____) _____

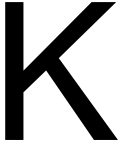
Address: _____
Street City State Zip Code

Signed: _____ Date Signed: _____

Mail to: Boys & Girls Clubs of the Gulf Coast, Attn: Human Resource Department, 11975-B Seaway Road, Gulfport, MS 39503, or
Fax to: (228) 896-3720

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How long have you known the applicant? _____ What is your relationship with the applicant? _____

Please check the appropriate box:

	Excellent	Good	Average	Poor	Unknown
Moral Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend that we accept this applicant? Yes No Questionable

Please explain your recommendation or add any further comments:

Your Name: _____ (Please Print Clearly) Position/Title: _____

Contact Number with Area Code: (_____) _____

Address: _____
Street City State Zip Code

Signed: _____ Date Signed: _____

Mail to: Boys & Girls Clubs of the Gulf Coast, Attn: Human Resource Department, 11975-B Seaway Road, Gulfport, MS 39503, or
Fax to: (228) 896-3720