

# YOUTH GUIDANCE ASSOCIATION

2730 NE Flanders  
Portland, OR 97232  
(503) 234-0085  
www.ygapdx.org

Application for  
Employment

**CONFIDENTIAL**

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PLEASE COMPLETE BY PRINTING IN INK OR TYPING  
COMPLETE ALL QUESTIONS - SIGN YOUR NAME ON LAST PAGE.

NAME: \_\_\_\_\_

POSITION APPLIED FOR:

DATE:

\_\_\_\_\_

\_\_\_\_\_

ADDRESS (INCLUDE ZIP):

HOME PHONE AND/OR CELL PHONE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EMAIL ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

SOCIAL SECURITY NUMBER:

DATE YOU CAN START:

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION/TRAINING**

Do you have a high school diploma?      YES      NO

If yes, give name and location\_\_\_\_\_

If you have GED instead, give name and location\_\_\_\_\_

**COLLEGE AND/OR ADDITIONAL EDUCATION:**

School	Field of study/major	Dates

School	Field of study/major	Dates

**LIST DEGREES, LICENSES AND CERTIFICATIONS:**

\_\_\_\_\_  
\_\_\_\_\_

**SKILLS (LIST THOSE APPLICABLE TO POSITION):**

\_\_\_\_\_  
\_\_\_\_\_

DO YOU HAVE A VALID DRIVERS LICENSE?\_\_\_\_\_WHICH STATE?\_\_\_\_\_

LIST ANY DRIVING VIOLATIONS AND/OR ACCIDENTS WITHIN THE PAST THREE YEARS

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been employed by this Organization?    Yes      No

If yes, explain:\_\_\_\_\_

\_\_\_\_\_

If employed here, would you be working under the direct supervision of a relative?    Yes      No

Have you ever been employed using any other name?    Yes      No

If yes, explain:\_\_\_\_\_

\_\_\_\_\_

Have you even been convicted of a felony or any crime against children? \*See note on page 4.  
(A 'yes' answer will not automatically disqualify you from consideration)      Yes      No

If yes, explain:\_\_\_\_\_

**CURRENT AND PRIOR EMPLOYMENT**

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
(month/year) (month/year)

Address \_\_\_\_\_ Telephone number \_\_\_\_\_

Your title \_\_\_\_\_ Supervisor's name \_\_\_\_\_  
Describe your duties and responsibilities:

\_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
May we contact this employer? Yes No

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Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
(month/year) (month/year)

Address \_\_\_\_\_ Telephone number \_\_\_\_\_

Your title \_\_\_\_\_ Supervisor's name \_\_\_\_\_  
Describe your duties and responsibilities:

\_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
May we contact this employer? Yes No

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Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
(month/year) (month/year)

Address \_\_\_\_\_ Telephone number \_\_\_\_\_

Your title \_\_\_\_\_ Supervisor's name \_\_\_\_\_  
Describe your duties and responsibilities:

\_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Reason for leaving \_\_\_\_\_  
May we contact this employer? Yes No

LIST ADDITIONAL REFERENCES BELOW:

Name	Phone	Relationship (not a relative)
_____	_____	_____
_____	_____	_____
_____	_____	_____

**\* Note: As part of the hiring process, all employees are subject to a criminal history check. Falsification or omission of this information will make you subject to termination.**

PLEASE USE THE SPACE BELOW FOR ANY ADDITIONAL INFORMATION

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials or during any interviews can be justification of refusal of employment, or if employed, termination from employment.
2. Any offer of employment I may receive from YGA is contingent upon my successful completion of it's total pre-employment screening process, including receiving satisfactory results from reference, criminal and, if necessary, credit checks.
3. I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested confirmation.
4. YGA is an equal employment opportunity employer that prohibits discrimination or harassment in the workplace based on gender, age, race and color, national origin, religion, mental or physical disabilities, veteran status or sexual orientation.
5. In consideration of my employment, I agree to comply with all company policies, rules, regulations and procedures and understand that my employment and compensations can be terminated with or without cause or notice, at any time, at the option of either the company or me. I further understand that no company or representative, other than the Board of Directors has any authority to enter into any agreement with me for employment for any specific period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by the Board of Directors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date