



Application for Employment

The Boys & Girls Club of Harrisonburg/Rockingham County (BGCHR) is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis of age, color, national origin, race, religion, sex, marital status, disability, sexual orientation, creed, political belief, or veteran status.

Federal Law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identify within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

Please answer all questions in full and print clearly and neatly.

Personal Information:

Full Name: _____ SS# ____/____/____
Last First M.I

Mailing Address: _____
Street City State/Zip

Phone: Home () _____ Cell () _____

Email: _____ Daytime Phone: () _____

Are you 18 years of age or older? ____ Yes ____ No Date of Birth ____/____/____

Are you a US Citizen? ____ Yes ____ No If no, do you have a valid work ID ____ Yes ____ No
(If hired, proof of eligibility to work in the United States will be required.)

Are you currently serving in the U.S. Military? ____ Yes ____ No

If yes, Date of Service and Branch: _____

Have you ever been convicted of a crime? ____ Yes ____ No

If yes, please explain:

How were you referred to BGCHR? Please check the most appropriate response.

__ School __ Recruiter __ BGCHR Employee __ Ad __ Walk In __ Other: _____

Position Desired: _____ Date: ____/____/____

Have you ever applied for a position with this company? ____ Yes ____ No

If yes, When? _____



Salary Desired: _____ per _____ (please specify: hour, week, year)

Schedule Desired: _____ Full Time _____ Part Time # of Hours Desired Per Week: _____

Can you work overtime and/or weekends? _____ Yes _____ No

Will you accept temporary work? _____ Yes _____ No

Can you travel if required by this position: _____ Yes _____ No

Do you have transportation to/from work: _____ Yes _____ No

Please check all days you are available to work. _____ Mon _____ Tue _____ Wed _____ Thur _____ Fri

Date available to start: ____/____/____

Education:

Please list all education credentials including, degrees and certificates you have obtained from high school, college/universities, trade, or occupational schools.

High School

School Name _____ City and State _____

Graduation Date or Number of Years Completed _____

College

School Name _____ City and State _____

Graduation Date or Number of Years Completed _____

Degree or Field of Study _____

Graduate School

School Name _____ City and State _____

Graduation Date or Number of Years Completed _____

Degree or Field of Study _____



List any certificates (including GED) earned or in progress, and /or any additional training programs not included in your formal education.

List any Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, disability or veteran status).

Work Experience: *Please attach additional pages if necessary.*

Begin with your most recent employer; include military service assignments, internships, and volunteer opportunities relevant to the job for which you are applying.

Employer: _____ Position: _____

Address: _____ Telephone: _____

Start Date: _____ End Date: _____ Salary: _____ (please specify: hour, week, year)

Reason for Leaving: _____

May we contact this employer? Yes No

Employer: _____ Position: _____

Address: _____ Telephone: _____

Start Date: _____ End Date: _____ Salary: _____ (please specify: hour, week, year)

Reason for Leaving: _____

Employer: _____ Position: _____

Address: _____ Telephone: _____

Start Date: _____ End Date: _____ Salary: _____ (please specify: hour, week, year)



Reason for Leaving: _____

List any additional qualifications, professional licenses, or special skills that will make you an excellent candidate for the applied position.

References: *Please include three complete references. Do not include relatives.*

Name: _____ Professional Relationship: _____

Company: _____ Title: _____

Phone: _____ E-mail: _____

Name: _____ Professional Relationship: _____

Company: _____ Title: _____

Phone: _____ E-mail: _____

Name: _____ Professional Relationship: _____

Company: _____ Title: _____

Phone: _____ E-mail: _____

Release:

The nature of our organization requires that a background check be performed on every employee working under our organization. This is to ensure compliance with the Virginia Department of Social Services and to ensure the safety of those we serve here at the Boys and Girls Club of Harrisonburg/Rockingham County.



I hereby authorize Boys and Girls Club of Harrisonburg/Rockingham County 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. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving record, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from Business Engineering Inc. and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

Initials

Release Continued:

All hiring and employment at BGCHR is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by BGCHR has no specific term and may be terminated by the employee or BGCHR with or without notice. I acknowledge that BGCHR has not made any promises or representations that differ from those contained in this paragraph.

I understand that I must provide satisfactory documents to establish my identity and right to work in the United States if I am offered a position with BGCHR. The failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless individual, company, business institution or government agency from all liability with regard to furnishing information to BGCHR. I agree to release and hold harmless BGCHR from all liability with respect to the receipt of such information.

I certify that the information I have furnished on the application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with BGCHR may be terminated.

I understand that any offer of employment is contingent on a satisfactory background investigation. 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.

Applicant's Signature

Date

SWORN STATEMENT OR AFFIRMATION FOR CHILD DAY PROGRAMS

Please Print

Last Name	First	Middle	Maiden	Social Security Number
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Current Mailing Address	Street, P.O. Box #, Apt. #	City	State	Zip Code
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Boys & Girls Clubs of Harrisonburg and Rockingham County 620 Simms Ave Harrisonburg Virginia 22802

Name of Licensed/Registered Approved Facility/Provider	Street, P.O. Box #, Apt. #	City	State	Zip Code
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Have you lived outside of Virginia in the past five years? Yes No

If yes, what state(s) have you lived in: _____

Please respond to all four (4) questions below:

1. Have you ever been convicted of or are you the subject of pending charges of any crime within the Commonwealth of Virginia? Yes (convicted in Virginia) Yes (pending in Virginia) No

If yes to convicted or pending, specify crime(s): _____

2. Have you ever been convicted of or are you the subject of pending charges of any crime outside the Commonwealth of Virginia? Yes (convicted outside Virginia) Yes (pending outside Virginia) No

If yes to convicted or pending, specify crime(s) and state, or other location: _____

3. Have you ever been the subject of a founded complaint of child abuse or neglect within the Commonwealth of Virginia? Yes (in Virginia) No (in Virginia)

4. Have you ever been the subject of a founded complaint of child abuse or neglect outside the Commonwealth of Virginia? Yes (outside Virginia) No (outside Virginia)

If yes, specify state, or other location: _____

I hereby affirm that the information provided on this form is true and complete. I understand that the information is subject to verification and that making a materially false statement or affirmation is a Class I misdemeanor.

Signature

Date

Explanation of Sworn Statement or Affirmation

Requirement: Sections 63.2-1704, 63.2-1720, 63.2-1720.1, 63.2-1721, 63.2-1721.1, 63.2-1722, 63.2-1724 and 63.2-1725 of the *Code of Virginia* (Code) require individuals to provide a sworn statement or affirmation to a licensing, approving or hiring authority, facility, or agency prior to licensure, registration, approval, employment, or provision of volunteer services. A sworn disclosure or affirmation is a statement completed by a person attesting to whether he has ever been: (i) convicted of or the subject of pending charges of any crime within the Commonwealth or equivalent offense outside the Commonwealth, or (ii) the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth. Additionally for family day homes, the person affirms if he, or if he knows that any person who resides in the home, has a sex offense conviction or is the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth. The statement or affirmation must be made available to the Department of Social Services' representative.

Who must comply: These individuals must provide sworn statements or affirmations:

- Applicant upon application for licensure or registration as a child welfare agency, and any subsequent person designated as applicant, licensee, or registrant;
- Agent at the time of application who is or will be involved in the day-to-day operation of the child welfare agency or who is or will be alone with, in control of, or supervising one or more of the children and any subsequent person designated as agent who will be involved in the day-to-day operation or will be alone with, in control of, or supervising one or more of the children;
- Any other adult living in the home of an applicant for licensure or registration or approval as a family day home, or any existing employee or volunteer, and subsequent employee or volunteer or other adult living in the home;
- Operator of family day home requesting approval by family day system;
- Person who signs the statement of intent to operate a religiously exempt child day center;
- Any person who will be expected to be alone with one or more children enrolled in a religious exempt child day center; and
- Any employee or volunteer of a licensed, registered, or approved facility who is involved in the day-to-day operations or who is alone with, in control of, or supervising one or more children.

Note: Any other child day center or family day home that has not otherwise met these requirements, and applies to enter into a contract with a local department to provide child care services to clients of a local department, must also submit a sworn statement or affirmation.

Exception: A parent-volunteer is not required to provide a sworn statement or affirmation. A parent-volunteer is a person supervising, without pay, a group of children that includes the parent-volunteer's own child in a program that operates no more than four hours per day, provided that the parent-volunteer works under the direct supervision of a person who has received satisfactory background checks as provided for in the Code.

Any person making a materially false statement regarding any such offense is guilty of a Class 1 misdemeanor.

Further dissemination of the sworn statement information is prohibited other than to the Commissioner's representative or a federal or state authority or court in order to comply with an express requirement in the law for that dissemination.

Consequence: If a person required to submit a sworn statement or affirmation (i) fails to submit a sworn statement or affirmation, or (ii) has been convicted of a barrier crime (specified below), or (iii) has been convicted of any other felony in the last five years, or (iv) has been the subject of a founded complaint of child abuse or neglect, and the facility refuses to separate that person from employment or service:

- Licensure, registration or approval of a child day program is prohibited;
- Licensure, registration or approval will be revoked and renewal of a license or registration or religiously exempt status will be denied;
- Religiously exempt status will be revoked; and
- The child welfare agency will not be permitted to receive federal, state or local child care funds.

Exception: A person who wants to operate or to volunteer or work at a facility covered by this regulation, but who is disqualified because of a criminal conviction, or a criminal conviction in the background check of any other adult living in a family day home governed by this regulation may apply for a waiver if: 1) a non-barrier crime felony conviction occurred less than five years ago, or 2) any other adult living in the home of a state regulated family day home applicant or provider has been convicted of not more than one misdemeanor offense of assault and battery or assault and battery against a family or household member. This other adult may not be an assistant or substitute provider.



I hereby affirm that the information provided on this form is true and complete. I understand that the information is subject to verification and that making a materially false statement or affirmation is a Class I Misdemeanor.

Signature

Date

DEPARTMENT OF SOCIAL SERVICES

BARRIER CRIMES FOR:

- Licensed child day centers
- Religiously exempt child day centers
- Certified pre-schools
- Licensed family day homes
- Voluntarily registered family day homes
- Licensed family day systems
- Licensed system-approved family day homes
- The following if receiving federal, state, or local child care funds:
 - Local agency- approved family day homes
 - Local ordinance-approved family day homes
 - Programs of recreational activities offered by local governments
 - Unregulated family day homes (including in-home care)

<p>Also included as barrier crimes (in addition to the offences listed below) are the conviction of any other felony unless five years have elapsed since the conviction and a founded complaint of child abuse or neglect within or outside the Commonwealth.</p> <p>Convictions include prior adult convictions, juvenile convictions and adjudications of juvenile delinquency if offences involved would be a felony if committed by an adult within or outside the Commonwealth.</p>	<p>63.2-1719</p>
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OFFENSE Or Equivalent Offence in Another State	Code Section
Abduction (Kidnapping)	18.2-47A
Abduction with Intent to Extort Money or for Immoral Purpose	18.2-48



Abuse and Neglect of Children	18.2-371.1
Abuse and Neglect of Incapacitated Adults	18.2-369
Adulteration of Food, Drink, Drugs, Cosmetics, etc.	18.2-51.2
Aggravated Malicious Wounding	18.2-51.2

Allowing a child to be present during manufacture or attempted manufacture of methamphetamine	18.2-248.02
Assault or Assault and Battery (Exception: Child day center may hire individual convicted of not more than one misdemeanor offence if 10 years have elapsed following the conviction, unless the person committed such offence while employed in a child day center or the object of the offence was a minor)	18.2-57
Assault and Battery against a Family or Household Member	18.2-57.2
Assisting individuals in unlawfully procuring prescription drugs (Felony Convictions)	18.2-258.2
Employing or Permitting Minor to Assist in Obscenity and Related Offences	18.2-379
Entering Bank, Armed, with intent to Commit Larceny	18.2-93
Entering Dwelling House, etc. with intent to Commit Larceny, Assault and Battery, or Other Felony	18.2-91
Entering Dwelling House, Etc. with the Intent to Commit Murder, Rape, Robbery, or Arson	18.2-90
Escape from Jail	18.2-477
Failing to Secure Medical Attention for Injured Child	18.2-314
Felonies by Prisoners	53.1-203
Firearms- Allowing Access by Children	18.2-56.2
Hazing of Student at School, College, or University	18.2-56
Hazing of Youth Gang Members	18.2-33
Homicide	18.2-33
Illegal Stimulants and Steroids	18.2-248.5
Incest	18.2-366B



Involuntary Manslaughter	18.2-36.1
Killing a Fetus	18.2-32.2
Maiming, etc. of Another Resulting from Driving While Intoxicated	18.2-51.4
Maintaining a Fortified Drug House (Felony Convictions)	18.2-258.02

Malicious Bodily Injury by Means of any Caustic Substance or Agent or Use of any Explosive or Fire	18.2-52
Malicious Bodily Injury to Law Enforcement Officers	18.2-51.1
Malicious Wounding by Mob	18.2-41
Manufacture, Possession, Use, etc. of Fire Bombs or Explosive Materials or Devices	18.2-85
Manufacturing, Selling, Giving, or Distributing or Possessing with intent to Manufacture, Sell, Give, or Distribute any Anabolic Steroid (Felony Convictions)	18.2-248
Murder, Capital	18.2-31
Murder, First and Second Degree	18.2-32
Murder of a Pregnant Woman	18.2-32.1
Obscenity Offences	18.2-374.1
Obtaining Drugs, Procuring Administration of Controlled Substances, etc. by Fraud, Deceit or Forgery (Felony Convictions)	18.2-258.1
Pandering	18.2-355
Transporting Controlled Substances into the Commonwealth (Felony Convictions)	18.2-248.01
Use of a Machine Gun in a Crime of Violence	18.2-289
Use of Machine Gun for Aggressive Purpose	18.2-290
Use or Display of Firearm in Committing a Felony	18.2-53.1
Voluntary Manslaughter	18.2-35