



LYFE
LEADING YOUTH FOR EXCELLENCE

BCL Partners, LLC.

EMPLOYMENT APPLICATION

BCL Partners, LLC., is an Equal Opportunity Employer and does not discriminate based on race, sex, age, religion, marital status, national origin, sexual preference, criminal history, or disability.

Position Applying for: DIRECT CARE SUPERVISOR ASST. DIRECTOR SOCIAL WORKER DIRECTOR

Date of Application: _____

For our recruitment purposes please answer the following: How did you hear about this position?

Name (last): _____

Name (first, middle): _____

Home Address (city, state, zip): _____

How long have you lived at this address? _____

List last three previous address and dates:

1) _____

2) _____

3) _____

How many different addresses have you had in the last 5 years? _____ 10 years? _____

Telephone number: _____

Email address: _____

Are you over 18 years of age? YES NO

When are you available to work? (Please circle all that apply)

Full-time Part-time Days Evenings Weekends

Do you have a valid driver's licenses? YES NO

If yes, please provide information:

License Number: _____

State: _____

Expiration Date: _____

Do you currently have any traffic violation points against you? _____

If yes, how many violations? _____

Are you currently insured and have unrestricted access to a vehicle with at least \$100,000/\$300,000 liability coverage (Required for any position where clients are transported)? _____

Have you had any accidents in the last three years? _____

If yes, please give dates and indicate damage and/or injuries (use separate sheet if needed):

Education/Training Information

High School Name: _____

Location: _____

Major Course of Study: _____

Certification Acquired: _____

College/University: _____

Location: _____

Major Course of Study: _____

Certification Acquired: _____

Postgraduate: _____

Location: _____

Major Course of Study: _____

Certification Acquired: _____

List your extracurricular activities and awards:

Please list any business office related experience including proficiency and types of equipment:

Employment History

Please give complete history starting from most recent employer including any part-time employment or military experience.

1. Start Date: _____ End Date: _____

Company Name: _____

Company Address: _____

Company Telephone: _____

Supervisor's Name: _____

Reason for Termination: _____

Duties: _____

2. Start Date: _____ End Date: _____

Company Name: _____

Company Address: _____

Company Telephone: _____

Supervisor's Name: _____

Reason for Termination: _____

Duties: _____

3. Start Date: _____ End Date: _____

Company Name: _____

Company Address: _____

Company Telephone: _____

Supervisor's Name: _____

Reason for Termination: _____

Duties: _____

I give permission to BCL Partners, LLC. to contact any or all the former employers listed above to verify the information provided.

Please attach resume.

Applicant signature: _____

Date: _____

Character References

Please list character references below. BLC Partners, LLC requires one personal reference from someone that has a close relationship with you who can verify your community involvement and two professional references from someone who can provide insight into your character and work history.

Personal Reference (1 required)

Name: _____

Address (including zip code): _____

Telephone number: _____

How long known: _____

Relationship to you: _____

Professional References (2 required)

Name: _____

Address (including zip code): _____

Telephone number: _____

How long known: _____

Relationship to you: _____

Name: _____

Address (including zip code): _____

Telephone number: _____

How long known: _____

Relationship to you: _____

Please write about your hobbies, interests, special skills, life experiences, volunteer experiences and career goals that you feel are assets in working with young people and their families.

Additional Information

Have you even been employed by BCL Partners, LLC.? _____

If you answered yes, please list the date and a reason for termination:

I attest that the information contained in this application is correct and to the best of my knowledge and understand that falsification of this information is ground for refusal to hire, or if hired, dismissal.

I authorize BCL Partners, LLC. to contact persons or organizations referenced in this application for the purpose of providing all information concerning my previous employment, education, or any other information they might have personal or otherwise regarding my suitability for employment. I release all such parties from all liability for any damages that may result from furnishing such information.

In consideration for my employment and my being considered for employment by BCL Partners, LLC. I agree to conform to these rules and regulations of the corporation and acknowledge that these rules and regulations may be changed, interpreted withdrawn or added to at any time at the corporation's sole option and without any notice to me.

I further acknowledge that my employment may be terminated and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of the BCL Partners, LLC. or myself.

Applicant Signature: _____

Date: _____