



of Carpinteria

Girls Inc. of Carpinteria Pre-Employment Questionnaire

Name _____

Date _____

Check all positions you are applying for. Please review all available job descriptions thoroughly before applying.

- Summer Day Camp Facilitator* *Eureka! Facilitator* *Eureka! Group Leader*

Why are you interested in being part of the Girls Inc. Team?

Describe your relevant work experience and how it has prepared you for this position.

Review the job description. Which responsibilities will you excel in and why?

What aspects of this position or positions would you find the most rewarding?

What aspects of this position or positions would you find the most challenging?

PERSONNEL RECORD
(Form to be completed by employee)

DATE
NAME OF FACILITY Girls Inc. of Carpinteria
FACILITY ADDRESS 5315 Foothill Rd. Carpinteria CA 93103
FACILITY FILE NUMBER

1. PERSONAL

NAME (LAST FIRST MIDDLE)	TELEPHONE ()
ADDRESS	ARE YOU 18 YEARS OF AGE OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE STATE YOUR AGE
	DATE OF LAST TB TEST

HAVE YOU EVER BEEN EMPLOYED UNDER A DIFFERENT NAME? YES NO IF YES, PLEASE LIST ALL NAMES USED.

DO YOU POSSESS A VALID CALIFORNIA DRIVER'S LICENSE? YES NO

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? YES NO

2. POSITION

TITLE	SALARY	HOURS	DATE OF EMPLOYMENT
NAME OF SUPERVISOR			

3. PREVIOUS EMPLOYMENT (List most recent experience first. If additional space is needed, please attach a separate page.)

NAME AND ADDRESS OF EMPLOYER	TELEPHONE NUMBER	JOB TITLE AND TYPE OF WORK	REASON FOR LEAVING	DATES	
				FROM	TO

4. EDUCATION

CIRCLE HIGHEST YEAR COMPLETED 6 7 8 9 10 11 12	DIPLOMA	CURRENTLY ENROLLED IN HIGH SCHOOL COMPLETION COURSE? <input type="checkbox"/> NO <input type="checkbox"/> YES IF YES, GIVE EXPECTED COMPLETION DATE _____
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EMPLOYMENT — RELATED EDUCATION COURSES

COURSE TITLE	NAME OF SCHOOL OR ORGANIZATION AND ADDRESS	NUMBER UNITS COMPLETED	DATE COMPLETED	CURRENTLY ENROLLED

