

Application For Employment Girl Scouts of Gateway Council

Check One	
Re-Employment A	Applicant
☐ Transfer Applican	t
NOTE: Applicants for tr also complete Suppleme Employment in Girl Sco	nt to Application for

Girl Scouts of the USA is an equal opportunity employer. All applications for employment will be considered without regard to race, religion, color, sex, citizenship, disability or marital status.

Personal Data								
Last Name	First Nan	ne	Middle Name or Initial			Social S	Security #	Date of Application
Present Address (Number and Street)						State	Zip Code	Area Code and Telephone #
Permanent Address (if different from above)						State	Zip Code	Area Code and Telephone #
Position Desire	d			gular nporary	_	l Time t Time	Date Available	Salary Desired
Source of Referral: Agency (name) Publication (name) School/Organization			Employee (name)					
Willing to Travel?	Percentage of Time		Willing to Relocate? Geograph Yes No				rence	Do you have relatives employed by GSUSA? Yes No
Were you ever employ	yed by GSUSA?			Have yo	u previous	sly applie	d to GSUSA?	.1
Yes No	When?	Where?	ere? Yes No			W	hen?	Where?
Employment H	istory							
Current or Most Recent Employer Name						Title or Position		
Address		City				State	Zip Code	Area Code and Telephone #
Employment Dates (month and year) Star \$			Starting Salary \$ per			Final Sa	per	Other Compensation
Name and Title of Immediate Supervisor Reason			for Leavir	ıg		I		1
Description of Duties								

Employment History (continued)						
Previous Employer Name		Title or Position				
Address	City	State	Zip Code	Area Code and Telephone #		
Employment Dates (month and year)	Starting Salary	Final Salary		Other Compensation		
	\$ per	\$	per			
Name and Title of Immediate Supervisor	Reason for Leaving					
Description of Duties						
Previous Employer Name		Title or I	Position			
Address	City	State	Zip Code	Area Code and Telephone #		
				()		
Employment Dates (month and year)	Starting Salary	Final Sal	ary	Other Compensation		
	\$ per	\$	per			
Name and Title of Immediate Supervisor	Reason for Leaving					
Description of Duties						
Previous Employer Name		Title or I	Position			
Address	City	State	Zip Code	Area Code and Telephone #		
				()		
Employment Dates (month and year) Starting Salary		Final Sal	lary	Other Compensation		
	\$ per	\$	per			
Name and Title of Immediate Supervisor	Reason for Leaving					
Description of Duties						

Statement (explain briefly why you are interested in working for our organization):

Education		Address, City, State and Zip Code	Major/Minor		Graduate?		Degree or Credit
High School					Yes	No	
College					Yes	No	
College					Yes	No	
Graduate School					Yes	No No	
Business/Technical School	l				Yes	No	
Academic Honors:							
Skills Check all that apply	Personal Com Microsoft Acc Calculator Other:	ess	oint Adob	osoft Exc oe Photos Entry, Kl	_	-	rosoft Outlook bbe Acrobat
Training							
Sponsoring Organization and Location		Name of Course, Seminar, etc.	CEU's Numb		per of Hours Da		tes
Volunteer Activitie	S (you need not list	t organizations whose name or nature in	dicates your race, sex	, nationa	l origin, age o	religi	ion)
Organization		Position / Offices Held	Describe Respons	and Services		Number of Years	

References					
Please indicate whether schooling of	r employment was under	another name:			
Applicants without recent employed	experiences list persons	other than relatives who know of your quali	fications and/or background experience.		
Name	Profession	Area Code and Telephone #	Business or Home Address		
		B: ()			
		H: ()			
		B: ()			
		H: ()			
		B: ()			
		H: ()			
I hereby authorize you to check all rences to release to you all information			s as indicated below; I further authorize these refer-		
Present Employer	☐ Present Employer ☐ Present employer after receiving position				
Previous Employers		Additional references listed			
Do you have any physical, mental o No Yes If yes, please		t would interfere with your ability to perfor	m the job for which you have applied?		
Have you ever been convicted of a call of the second of th		violations)?			
voluntarily leave employment upon trary are hereby expressly disavowe I certify that my answers to the prec affect my application unfavorably. I	proper notice and may be d and should not be relied eding questions are true understand that any miss	the terminated by GSUSA at any time. I under the dupon by any prospective or existing emplayment and complete and that I have not knowingly representation or omission of the facts on the	mployment, and that any individual who is hired may restand that any oral or written statements to the conoyee. withheld any information which might, if disclosed, is application will be cause for rejection of this apphysical examination and satisfactory completion of a		
Signature			Date		