

**Barshop Jewish Community Center of San Antonio**  
**APPLICATION FOR EMPLOYMENT**  
 Pre-Employment Questionnaire • An Equal Opportunity Employer



**PERSONAL INFORMATION**

NAME (LAST NAME FIRST)				SOCIAL SECURITY NO.			
PRESENT ADDRESS		APT. NO.	CITY		STATE	ZIP	
PERMANENT ADDRESS		APT. NO.	CITY		STATE	ZIP	
ARE YOU 18 YEARS OR OLDER? <input type="radio"/> YES <input type="radio"/> NO				PHONE			

**DESIRED EMPLOYMENT**

POSITION		DATE YOU CAN START		DESIRED SALARY	
ARE YOU EMPLOYED NOW? <input type="radio"/> YES <input type="radio"/> NO		IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="radio"/> YES <input type="radio"/> NO		PHONE	
EVER APPLIED TO A JCC BEFORE?		WHAT DEPARTMENT?		WHEN?WHERE?	
EVER WORKED FOR A JCC BEFORE?		WHAT DEPARTMENT?		WHEN?WHERE?	
REASON FOR LEAVING			NAME OF LAST SUPERVISOR AT THIS COMPANY		
WHO REFERRED YOU TO THE JCC? <input type="radio"/> EMPLOYMENT AGENCY <input type="radio"/> NEWSPAPER ADVERTISEMENT <input type="radio"/> FRIEND <input type="radio"/> STATE EMPLOYMENT OFFICE <input type="radio"/> COLLEGE PLACEMENT SERVICE <input type="radio"/> WALK-IN <input type="radio"/> OTHER					

**EDUCATION**

SCHOOL LEVEL	NAME/LOCATION OF SCHOOL	NO. YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS or CORRESPONDENCE SCHOOL				

**GENERAL**

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK
SPECIAL TRAINING
SPECIAL SKILLS

**FORMER EMPLOYERS**

LIST BELOW THE LAST THREE EMPLOYERS STARTING WITH THE MOST RECENT ONE FIRST.

NAME OF EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	POSITION		
WEEKLY SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="radio"/> YES <input type="radio"/> NO	NAME OF SUPERVISOR		
TITLE		PHONE		
REASON FOR LEAVING				

NAME OF EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	POSITION		
WEEKLY SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="radio"/> YES <input type="radio"/> NO	NAME OF SUPERVISOR		
TITLE		PHONE		
REASON FOR LEAVING				

NAME OF EMPLOYER				
ADDRESS		CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	POSITION		
WEEKLY SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="radio"/> YES <input type="radio"/> NO	NAME OF SUPERVISOR		
TITLE		PHONE		
REASON FOR LEAVING				

**REFERENCES**

GIVE THE NAMES OF THREE PERSONS YOU ARE NOT RELATED TO WHOM YOU HAVE KNOWN AT LEAST 1 YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED	PHONE
1				
2				
3				

HAVE YOU BEEN CONVICTED OF A FELONY IN THE LAST 5 YEARS?     YES     NO

IF YES, EXPLAIN (WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION)


**AUTHORIZATION**

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.

\_\_\_\_\_  
DATE\_\_\_\_\_  
SIGNATURE

**DO NOT WRITE ON THIS PAGE • FOR INTERVIEWER'S USE ONLY**

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

INTERVIEWED BY	DATE
COMMENTS	

HIRED DATE	DEPARTMENT	POSITION
SALARY/WAGES		START DATE

<b>APPROVED</b> 1	DEPARTMENT HEAD	DATE
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<b>APPROVED</b> 2	EXECUTIVE DIRECTOR	DATE
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<b>APPROVED</b> 3	COMPTROLLER	DATE
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**Barshop Jewish Community Center of San Antonio**  
**12500 N.W. Military Hwy., Ste. 275**  
**San Antonio, Texas 78231 (210) 302-6820**

