



Lompoc Teen Center Employment Application

Employment Application Checklist

For full consideration, please send **all** application materials listed below to info@lompocteencenter.org

- Fully-completed Lompoc Teen Center Employment Application
- Current resume detailing your education, professional experience over the last five (5) years minimum, and skills as they relate to Lompoc Teen Center and the position you are applying for
- Personalized cover letter
- School transcript(s) of all educational institutions you have ever attended

Equal Employer Opportunity (EEO) Statement

Lompoc Teen Center does not discriminate on the basis of race, creed, color, national origin, sex, gender, sexual orientation, age, religion, mental or physical disability, medical condition, genetic information, marital status, military service, or any other basis protected by law in any of its policies, procedures, or practices, in compliance with Title VI of the Civil Rights Act of 1964 (pertaining to race, color, and national origin), Title IX of the Educational Amendments of 1972 (pertaining to sex), Section 504 of the Rehabilitation Act of 1973 (pertaining to handicap), the Age Discrimination Act of 1975 (pertaining to age), and the American with Disabilities Act of 1990.

Disability Statement

Lompoc Teen Center will provide reasonable accommodations for qualified individuals with disabilities. Please notify the employer if you need a reasonable accommodation for any part of the application and hiring process. Determinations on requests for reasonable accommodations will be made on a case-by-case basis.

Personal Information

1. First Name <input type="text"/>	2. Last Name <input type="text"/>	3. Social Security Number (SSN) <input type="text"/>	
7. Street Address <input type="text"/>	Apt/Spc/Ste <input type="text"/>	8. City <input type="text"/>	9. State <input type="text"/>
10. Zip Code <input type="text"/>	11. Phone <input type="text"/>		
12. Email <input type="text"/>			

Emergency Contact

1. Emergency Contact Name <input type="text"/>	2. Emergency Contact Relationship <input type="text"/>	3. Emergency Contact Phone <input type="text"/>
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Position Information

1. Position Applying For <input type="text"/>	2. Desired Hourly Rate/Salary <input type="text"/>	3. Available Start Date <input type="text"/>
4. Weekly Availability/Desired Schedule	5. Available Start Time (e.g. 2:00 p.m.) <input type="text"/>	6. Available End Time (e.g. 6:00 p.m.) <input type="text"/>
<input type="checkbox"/> Mondays	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Tuesdays	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Wednesdays	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Thursdays	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Fridays	<input type="text"/>	<input type="text"/>



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Professional References

Please provide two (2) professional references that can attest to your work ethic, skills, and character. These references should be individuals who have directly supervised or collaborated with you in a professional capacity within the last five years. Additionally, please ensure that their information, including name, title, company/organization, email address or phone number, is accurate and up-to-date.

1. Reference Full Name (e.g. Dr. Jane Doe)	2. Time Acquainted	2. Reference Relationship (e.g. Math Professor at Hancock College)	3. Professional Reference Contact Information (Email or Phone)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Employment Eligibility

1. Are you legally authorized to work in the United States? <input type="radio"/> No <input type="radio"/> Yes	2. Are you eighteen (18) years of age or older? <input type="radio"/> No <input type="radio"/> Yes	3. Have you previously worked for Lompoc Teen Center? <input type="radio"/> No <input type="radio"/> Yes	
4. Do you have a valid driver's license? <input type="radio"/> No <input type="radio"/> Yes	5. Driver's License Number <input type="text"/>	6. Issuing State <input type="text"/>	7. Expiration Date <input type="text"/>

Request for Live Scan Service

By signing and submitting this application, I hereby consent to Lompoc Teen Center's request for a Live Scan background check through the Federal Bureau of Investigation (FBI) and the California Department of Justice (DOJ). I understand that this background check is a prerequisite for employment consideration and may include a review of criminal history records. I authorize the release of any relevant information obtained through this background check to Lompoc Teen Center for employment purposes. I understand that any offer of employment is contingent upon the satisfactory results of this background check.

Applicant Initial

Request for Driving Record Information

By signing and submitting this application, I hereby consent to Lompoc Teen Center's request to obtain a copy of my driving record as part of the pre-employment screening process. I understand that this driving record check is necessary for positions that involve driving or the transportation of students using Lompoc Teen Center approved vehicles. I authorize the release of my driving record information to Lompoc Teen Center and understand that any offer of employment is contingent upon the satisfactory review of my driving record.

Applicant Initial

Negative Tuberculosis (TB) Test

I hereby authorize the release of my Tuberculosis (TB) test results to Lompoc Teen Center as part of the pre-employment screening process. I understand that providing proof of a negative TB test result is a requirement for employment consideration. I authorize the healthcare provider or facility conducting the TB test to disclose my test results to Lompoc Teen Center. I certify that all information provided by me in connection with this process is true, accurate, and complete to the best of my knowledge. I understand that any offer of employment is contingent upon the satisfactory results of this TB test.

Applicant Initial

Carefully Review and Sign before Submitting

By signing and submitting this Lompoc Teen Center Employment Application, I acknowledge and agree to the following terms and conditions:

Accuracy of Information

I certify that all information provided in this job application, including my resume, cover letter, and any other supporting documents, is true, accurate, and complete to the best of my knowledge. I understand that any false statements or omissions may result in disqualification from consideration for employment or termination of employment if discovered at a later date.

Authorization for Release of Information

I authorize Lompoc Teen Center to contact my references, former employers, educational institutions, and any other individuals or entities necessary to verify the information provided in this application and to assess my qualifications for employment.

Consent to Data Processing

I understand that the personal information provided in this job application will be collected, used, and processed in accordance with Lompoc Teen Center's privacy notice. I consent to the processing of my personal information for the purposes outlined in the privacy notice.

Verification of Eligibility to Work

I understand that any offer of employment is contingent upon verification of my eligibility to work in the United States as required by the Immigration Reform and Control Act of 1986.

Acknowledgment of Receipt

I acknowledge that I have received and reviewed the job description for the position applied for and understand the duties, responsibilities, and requirements of the position.

1. Applicant Full Name <input type="text"/>	2. Applicant Signature <input type="text"/>	3. Date <input type="text"/>
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