



# FOUNDATION FOR YOUTH

405 Hope Avenue  
Columbus, IN 47201  
Phone: 812-372-7867  
Fax: 812-372-3226  
www.foundationforyouth.com

## Application for Employment

\_\_\_\_\_  
First Name Last MI

\_\_\_\_\_  
Street Address/PO Box

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home Phone # Other Phone # Email

Applying for position of: \_\_\_\_\_

If under 18, please list age: \_\_\_\_\_

**Education:**

Name/Location of School Years Attended Degree

High School \_\_\_\_\_

College \_\_\_\_\_

Grad School \_\_\_\_\_

Major (s) \_\_\_\_\_ Minor (s) \_\_\_\_\_

**Describe personal experiences, skills, and characteristics that you feel qualify you for this position.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Why are you interested in this position?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Previous work experience (including most recent)**

Name of Organization	Supervisor's Name	Title/Position Held
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**Special Skills/Awards/Honors** \_\_\_\_\_

\_\_\_\_\_

**Certifications** \_\_\_\_\_

**List three references (other than those listed above)**

Name	Phone #	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

I certify that all the answers given by me to all of the questions on this application and any attachment are to the best of my knowledge true and that I have not withheld any pertinent information.

I understand that any omission, misrepresentation or false information submitted in connection with this application may result in refusal of or summary dismissal from employment.

I understand that in the course of considering my application, you may make inquiry to ascertain information concerning my background and I give permission to do so. I also understand that, upon written request, information as to the nature and scope of the inquiry, if one is made, will be provided to me.

I understand and agree that, if hired, my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either myself or Foundation For Youth.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date