

#### **READING SPECIALIST APPLICATION**

The Youth Life Learning Center's vision is to help children by strengthening families and rebuilding communities. The cornerstones to achieving our mission are academic development and values-based education, informed by Christian principles. By helping children develop into strong leaders and providing developmental support to parents and caregivers, we positively impact families and communities. <u>www.ylfr.org</u>

Date:		Date:	
<u>PER</u>	RSONAL INFORMATIO	N	
Nam	ne: Last	First	Middle
Pres	sent Address		
Perr	nanent Address (if differe	nt than above)	
Tele	phone Number	Email Addres	38
eligib	oility of all new employees. All	ent of unauthorized aliens and require offers of employment are contingent vidence of personal identity and auth	
Posi	tion Applied For:		
1.		n we would need about your nan eferences and employment histo	ne or use of another name for us to ry? Please specify:
2.			ormerly been) employed by The tion(s), and dates of employment.
	How work work as formed	to The Venth Life Learning Con	
3.	now were you referred	to The Youth Life Learning Cer	

4.	Have you ever been convicted of a felony?	Yes	No
	If yes, describe the nature and date of conviction	on(s).	

5. If your application receives favorable consideration, when will you be available to begin work?

## I acknowledge and affirm that all information herein is true and accurate.

Applicant Signature

Date

### **Educational Background**

	School or Institute & Location	Major/Minor	Grade Point Average	Years completed or Degree earned
High School				
College/University				
Graduate Study				
Technical Training				
Other				

List any specialized training or courses you have completed which will aid in evaluating your qualifications for the position you are seeking.

## **Teacher Certification & Experience**

Area of Certification	Issuing State/Accreditation Organization	Expiration Date

(Please attach photocopies of any certificates held.)

Number of years teaching: Public	Christian		Private	Other
Grade level experience: Pre-K	K-2	3-5	6-8	9-12
Are you currently under contract?				

\_\_\_\_\_

#### **Professional Information**

Membership in Professional Groups:

List any Awards and/or Honors Received:

**Employment History** (Please include all employment for the last five years, list your current or most recent employer first.)

Company Name	Position Held	
Manager/Supervisor	Dates Employed	
Manager Email	Phone Number	
Reason for Leaving	Salary	

Company Name	Position Held	
Manager/Supervisor	Dates Employed	
Manager Email	Phone Number	
Reason for Leaving	Salary	

Company Name	Position Held	
Manager/Supervisor	Dates Employed	
Manager Email	Phone Number	
Reason for Leaving	Salary	

Note: Use a separate sheet to list additional employers if necessary. We will contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

Employer

Reason

Employer

Reason

**<u>References</u>** (Please do not include relatives.)

Name	Email Address (required)	Phone Number	Years Known	Occupation/ Relationship

#### **MISSION STATEMENT AND CORE VALUES**

#### **Our Mission**

Developing leaders by making long-term investments in children from at-risk communities.

We accomplish our mission through after-school and summer programs that cultivate...

#### **Our Values**

Academic Success Character Development Spiritual Identity Physical & Emotional Security Family & Community Connection

Ultimately, this will result in...

#### **Our Vision**

Nurturing the Child Strengthening the Family Rebuilding the Community

Youth Life Foundation of Richmond exists to create doors of opportunity for children living in insecure environments through the establishment of community-based, values-driven Youth Life Learning Centers operating in select urban, suburban, and rural neighborhoods throughout America.

Hence:

Youth Life Foundation believes that the breadth and effectiveness of its public service is directly related to the depth, sincerity, and authenticity of commitment to the mission and core values of Youth Life Foundation demonstrated by each employee.

Youth Life Foundation regards each employee as a full-time ambassador. As such, all employees shall behave on and off the job in a manner consistent with the core values and mission of Youth Life Foundation. Each employee should consistently demonstrate and model humility, peace, patience, kindness, gentleness, joy, self-control, and a loving servant spirit.

I acknowledge my support of YLFR, its mission, values and vision, and commit to the expectations of a full-time ambassador as described above.

#### APPLICANT RELEASE AND ACKNOWLEDGEMENTS

# Please read this section carefully and acknowledge your understanding by signing your name.

**1. Consent to Conduct Background Investigation**. As a condition of and in consideration for the Youth Life Foundation's consideration of this application, I give permission to the Youth Life Foundation to investigate my personal, educational, and employment history. I understand that this background investigation will include but not be limited to verification of all information on this application as well as interviews with past employers. I further give permission to the Youth Life Foundation to conduct this investigation and to discuss the results of this investigation in connection with my application for employment.

**2. Consent To Contact Past Employers**. I give permission to the Youth Life Foundation to contact all employers listed in this application (except those specifically excluded) for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with the Youth Life Foundation, consent to the release of such information orally or in writing, and hereby release all parties from all liability and agree not to sue for defamation or other claims based upon any statements made to any representative of the Youth Life Foundation. I further waive all rights that I may have under law to receive a copy of any written statement provided by any of my former employers to the Youth Life Foundation. I further agree to indemnify the Youth Life Foundation and all past employers for any liability they may incur because of their reliance upon this release.

**3.** Consent To Contact Government Agencies. I give permission to any agent, attorney or representative of the Youth Life Foundation to receive a copy of my information in the file of any federal, state or local court, government agency, law enforcement agency or investigator concerning or relating to me, including criminal records checks, and consumer reports. I further consent to the release of such information and waive any right under law concerning notification of the request for a release of such information. In the event a state law does not provide for prospective employers to have access to information, I hereby delegate the Youth Life Foundation as my agent for receipt of my information. I understand that the scope of this investigation will be limited to criminal and/or civil records that relate to my honesty, integrity and/or abilities.

**4. Cooperation With Investigation**. I agree to fully cooperate in the Youth Life Foundation's background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state or local government agency will not release reference information or criminal history information directly to the employer, I agree to personally request such information to the extent permitted by law.

**5.** Falsification Statement. I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of this application, or, if discovered after an offer of employment, for immediate dismissal.

**6. Employment "At Will"**. In consideration of my employment, I agree to conform to the rules and regulations of the Youth Life Foundation as they are promulgated from time to time. I further agree that my employment and compensation is "at will" in that they can be terminated with or without cause, and with or without notice, at any time, at the option of either the Youth Life Foundation or myself, except as otherwise provided by law. I understand that no manager or representative of the Youth Life Foundation, other than the President or Chief of Staff of the Youth Life Foundation, has authority to enter into any agreement for employment for any specified period of time, and that any promises to the contrary will only be relied upon by me if they are in writing and signed by the President or Chief of Staff of the Youth Life Foundation.

**7. Children's Workers**. I understand that all Foundation employees who work directly with children must submit to a fingerprint check by the federal and possibly state authorities. I agree to fully cooperate in providing and recording as many sets of fingerprints as may be necessary for investigation as a requirement for my working with children.

**8.** Application for Employment. I understand that this is an application for employment and that no offer of employment is being hereby extended.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.

## CONFIDENTIAL RELEASE AND WAIVER

It is my understanding the Youth Life Foundation will conduct a comprehensive background investigation to obtain information pertaining to my Criminal History. I hereby authorize the Youth Life Foundation to receive information from any law-enforcement agency, including police departments and sheriff's departments, of this state or any other state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to convictions for crimes committed upon children. I hereby release The Youth Life Foundation from any and all liability for damages of whatever kind, except for gross negligence and intentional misconduct which may at any time result to me because of compliance with this authorization and request to release information or any attempt to comply with it.

Full Name (printed):				
Signature:	Date:			
Address:				
	Date of Birth:			
Driver's License Number and State:				
sheet of paper to list additional addresses.	esided for the past ten years. Please use a separate			