



Girl Scouts of Rhode Island, Inc.

STIPENDED STAFF APPLICATION

This council is an equal opportunity employer. All applications will be considered without regard to race, religion, color, sex, age, national origin or ancestry, citizenship, disability, marital status, veteran status, sexual orientation or gender identity or expression.

Return completed form to:
 Girl Scouts of Rhode Island, Inc.
 125 Charles St.
 Providence, RI 02904
 Or FAX 401-421-2937

Please Print Clearly

PERSONAL INFORMATION

NAME			DATE OF APPLICATION
STREET ADDRESS			AREA CODE & TELEPHONE NO. (HOME)
CITY	STATE	ZIP	AREA CODE & TELEPHONE NO. (CELL)
PRESENT OCCUPATION OR YEAR IN SCHOOL			E-MAIL ADDRESS
WHERE DID YOU LEARN ABOUT THIS GIRL SCOUT POSITION?		ARE YOU 18 or OLDER?	REGISTERED MEMBER OF GSUSA
		Yes No	Yes No
Are you currently a student? Yes No If "Yes", Full-time Part-time			Council name:
Have you ever been convicted of a crime (other than traffic violations) Yes No			
If yes, please state offense, date, and location. A conviction record will not necessarily be cause for disqualification.			

POSITION PREFERENCES - Check All That Apply

POSTION: After-School Program Leader _____ Summer Program Leader _____ Other _____
 AGE LEVEL: Girls K-3rd (ages 5-8) _____ Girls 4th-6th (ages 9-11) _____ Girls ages 11-13 _____ Girls ages 14-17 _____
 TIMES: During the Day _____ After-School _____ Weekdays _____ Occasional Weekends _____
 DURATION OF COMMITMENT: Year Long _____ School Year _____ 4-8 week assignment _____
 Do you have reliable transportation? Yes No How far are you willing to travel from home? _____
 LANGUAGES SPOKEN OTHER THAN ENGLISH: Spanish _____ Portuguese _____ Cape Verde Creole _____ Other: _____

EDUCATION

NAME OF SCHOOLS (HIGH SCHOOL, COLLEGE, GRADUATE SCHOOL)	DEGREE OR CREDITS

EMPLOYMENT HISTORY – PLEASE LIST MOST RECENT POSITIONS FIRST

Employer's Name and Phone #: _____

Position: _____ Major Responsibilities: _____

Dates Employed From _____ To _____ Supervisor's Name: _____

Employer's Name and Phone #: _____

Position: _____ Major Responsibilities: _____

Dates Employed From _____ To _____ Supervisor's Name: _____

VOLUNTEER EXPERIENCE

VOLUNTEER POSITION	AGENCY	PHONE NUMBER	SUPERVISOR	DATES

TRAINING AND SKILLS

COURSES TAKEN IN TRAINING OR LEADERSHIP (incl. Girl Scouts)	AGENCY	PLACE	DATE

OTHER TRAINING: LIST NAME OF COURSE AND DATE OF MOST RECENT CERTIFICATION

First aid	Course _____	Cert Date _____	CPR	Course _____	Cert Date _____
Lifeguard	Course _____	Cert Date _____	Water-safety instr.	Course _____	Cert Date _____
Registered nurse	Course _____	Cert Date _____	EMT	Course _____	Cert Date _____
Chauffeur's license	Course _____	Cert Date _____	Teacher/coach	Course _____	Cert Date _____

INTERESTS, HOBBIES, SKILLS – PLEASE CIRCLE ALL THAT APPLY

Arts & Crafts	Biking	Camping	Canoeing	Computers	Construction Trades	Cooking
Dancing	Engineering	Fashion Design	Finance	Gardening	Graphics Design	Hiking
Journalism	Law	Law Enforcement	Leadership	Mechanics	Media – Radio/TV	Medical
Music	Retail	Sailing	Science	Other: _____		

PERSONAL STATEMENT

Please, briefly summarize why you are interested in working for the Girl Scouts of Rhode Island .

REFERENCES

List three (3) persons NOT related to you who can judge your qualifications for this position.

NAME	ADDRESS	PHONE NUMBER

I hereby authorize you to check all my educational references and the personal and employment references as indicated below. I further authorize these references to release to you all information that they have about me (check all that apply):

Present employer _____ Present employer after accepting position _____ Previous Employers _____ Additional references listed _____

Girl Scouts of Rhode Island, Inc. is subject to the provisions of the Rhode Island Workers' Compensation Law, and employees and those receiving honoraria, employed in Rhode Island are covered by this law.

I understand that this employment application and any other Girl Scout documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the council at any time. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I also understand that I am submitting this application to become an employee of Girl Scouts of Rhode Island, Inc. and not GSUSA.

I certify that my answers to the preceding questions are true and complete and that I have not knowingly withheld any information which might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application will be cause for rejection of this application or dismissal after employment and that employment is subject to verification of references

 Signature Social Security Number Date

Office Use Only:

Interviewed, Date: _____ Initials: _____ References Checked, Date: _____ Initials: _____

No Further Interest Entered to DB Placement: _____