



JOB APPLICATION

Name: _____ Phone: () _____

Address: _____

City, State & Zip Code _____

Position applying for: _____

Location: _____

How Did You Hear About Us?

<u>Referral</u> , if so, by whom _____	<u>Job Fair</u> , if so, date/location: _____
<u>Web Site</u> : www. _____	<u>Other</u> , specify: _____

Please Complete the Following:

Are you able to perform the specific functions of this job (whether with or without accommodation)? Yes
 No: If *no*, please describe accommodation(s) required _____
Attachment if necessary

Have you ever applied to or worked for the Robert F. Kennedy Children's Action Corps?
 Yes Applied/Not Hired No I have not applied at RFK before
If former employee: which location did you work/apply? _____
 dates of employment: from: _____ to: _____
 reason for leaving: _____

Education:

	<u>INSTITUTION</u>	<u>DEGREE / CERTIFICATE / LICENSE</u>
High School:	_____	_____
College:	_____	_____
Graduate School:	_____	_____
Certificate(s) & License(s): Expiration Dates	_____	_____
Other Education or Training (including military):	_____	_____
	_____	_____
	_____	_____

Job-Related Experience:

Please list the **three most recent positions** you have held. Include related verifiable volunteer work experience.

Please complete all spaces including supervisor's full name, brief duties and salary information.

Employer: _____	Phone: _____	<small>Area code</small>
Address: _____		
City & State: _____		
Position Held or Title: _____		
Duties: _____		
Dates of Employment:	<i>From:</i> _____	<i>To:</i> _____
Supervisor's Name:	Salary: \$ _____	
Reason for Leaving: _____		

Employer: _____	Phone: _____	<small>Area code</small>
Address: _____		
City & State: _____		
Position Held or Title: _____		
Duties: _____		
Dates of Employment:	<i>From:</i> _____	<i>To:</i> _____
Supervisor's Name:	Salary: \$ _____	
Reason for Leaving: _____		

Employer: _____	Phone: _____	<small>Area code</small>
Address: _____		
City & State: _____		
Position Held or Title: _____		
Duties: _____		
Dates of Employment:	<i>From:</i> _____	<i>To:</i> _____
Supervisor's Name:	Salary: \$ _____	
Reason for Leaving: _____		

The Robert F. Kennedy Children's Action Corps is an Affirmative Action/Equal Opportunity Employer and encourages applications from candidates who would enhance the diversity of our agency. We do not discriminate based on race, color, religion, national origin, gender, sexual orientation, disability, or ethnicity.

In accordance with state law, this Agency will consider all related, verifiable volunteer work experience when assessing job applications. As of September 30, 1986, it is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment.

If you accept employment with the Agency, you must produce documents establishing your identity and employment eligibility within three days of your first day of work. Federal law requires the Agency to examine these documents, and failure to produce them will result in termination.

I have read and understood the above & state that the information given on this application is true to the best of my knowledge.

Signature of Applicant: _____ **Date:** _____



VOLUNTARY EEO INFORMATION

The Robert F. Kennedy Children's Action Corps is an Equal Opportunity Employer. RFK is committed to equality and welcomes cultural and ethnic diversity of our employees. RFK does not discriminate on the basis of age, race, creed, color, religion, marital status, gender, sexual orientation, veteran status, national origin, or disability status in employment or in our programs.

The information below is necessary to measure the effectiveness of our recruitment efforts; and is in conformity with federal government guidelines, which require employers to compile statistical data about employees. You are not required to furnish this data; however, we do encourage you to do so. The law provides that an employer may neither discriminate on the basis of this data, nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, employers are required to note race and gender on the basis of visual observation and surname.

Full Legal Name: _____ (please print legibly)

Gender: Male Female

Ethnic Category, please select one:

White (non-Hispanic or Latino)

Black or African American (non-Hispanic or Latino)

Hispanic or Latino/a

Asian (non-Hispanic or Latino)

American Indian or Alaskan Native (non-Hispanic or Latino)

Native Hawaiian or Other Pacific Islander (non-Hispanic or Latino)

Two or More Races (Two or more of the preceding races)

<u>VETERANS 100</u>		<u>VETERANS 100A</u>	
Have you been discharged from The US Military? <input type="checkbox"/> Yes <input type="checkbox"/> No		If so, date of discharge _____	
Vietnam Era Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Armed Forces Service Medal Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No		
Special Disabled Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Disabled Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Other Protected Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Other Protected Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Recently Separated Veteran (1 yr) <input type="checkbox"/> Yes <input type="checkbox"/> No	Recently Separated Veteran (3 Years) <input type="checkbox"/> Yes <input type="checkbox"/> No		

Signature: _____ Date: _____ I realize this data is voluntary

Safeguards have been instituted to ensure that this information cannot be used as a basis of discrimination

DEFINITIONS:

White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.

Disabled Individual: A person who has a physical or mental impairment that substantially limits one or more major life activities, who has a record of such impairment, or who is regarded as having such an impairment.

Disabled Veteran: a person who (1) is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under the laws administered by the Department of Veterans Affairs; or (2) was discharged or released from active duty because of a service-connected disability.

Other Protected Veteran: A veteran who served on active duty in the U.S. military, ground, naval, or air service during a war on or in a campaign or expedition for which campaign badge has been authorized. For those with Internet access, the information required to make this determination is available at <http://www.opm.gov/veterans/html/vgmedal2.htm>.

Veteran of the Vietnam era: A person who (1) served on active duty for a period of more than 180 days, and was discharged therefrom with other than dishonorable discharge, if any part of such active duty occurred (a) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (b) between August 5, 1964 and May 7, 1975, in all other cases; or (2) was discharged or released from active duty for a service-connected disability if any part of such active duty was performed (a) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (b) between August 5, 1964 and May 7, 1975.

Armed Forces Service Medal Veteran: a veteran who, while serving on active duty in the U.S. military ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Recently Separated Veteran: a veteran who served on active duty in the U.S. military, ground, naval, or air service and who was discharged or released from active duty less than three years before today's date.

Special Disabled Veteran: A person who is (1) a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability: (a) rated at 30 percent or more; or (b) rated at 10 or 20 percent in the case of a veteran who has been determined under 38 U.S.C. 3106 to have a serious employment handicap; or (2) a person who was discharged or released from active duty because of a service-connected disability.