



Glendale Youth Alliance Employment Application

Verdugo Jobs Center, 1255 S. Central Ave. Glendale, CA 91204

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1. PLEASE COMPLETE ENTIRE APPLICATION
2. PLEASE PRINT CLEARLY
3. FALSE STATEMENTS WILL RESULT IN REJECTION OF YOUR APPLICATION

DATE: ____/____/____

NAME: _____ BIRTH DATE: ____/____/____
LAST FIRST MIDDLE

STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: HOME (____) ____-____ MOBILE (____) ____-____ E-MAIL: _____@_____.COM

NUMBER OF PEOPLE LIVING AT HOME, INCLUDING YOURSELF: _____ MONTHLY HOUSEHOLD INCOME: \$ _____.

DO YOU RECEIVE GOVERNMENT ASSISTANCE SUCH AS WELFARE, CAL WORKS, AFDC, ETC. YES NO

ARE YOU CURRENTLY ATTENDING HIGH SCHOOL? YES NO NAME OF CURRENT OR LAST HIGH SCHOOL: _____

DID YOU GRADUATE HIGH SCHOOL? YES NO PLEASE CIRCLE: (DIPLOMA G.E.D. OR C.H.S.P.E.)

IF STILL IN HIGH SCHOOL, ANTICIPATED GRADUATION DATE: _____. WHAT GRADE ARE YOU IN? _____

IF OUT OF HIGH SCHOOL, ARE YOU CURRENTLY ATTENDING COLLEGE/UNIVERSITY? YES NO NAME OF COLLEGE/UNIVERSITY: _____

DO YOU HAVE VERIFICATION OF YOUR IDENTITY AND LEGAL RIGHT TO WORK DOCUMENTS IN THE UNITED STATES? _____

ARE YOU CURRENTLY EMPLOYED? YES NO IF SO, COMPANY NAME: _____ NUMBER OF HOURS PER WEEK: _____

IF NOT EMPLOYED, WILL THIS BE YOUR FIRST JOB? _____. HAVE YOU PREVIOUSLY PARTICIPATED IN GYA PROGRAMS? _____. IF YES, YEAR: _____

ARE YOU RELATED TO ANY GYA STAFF OR BOARD MEMBER, CITY OF GLENDALE EMPLOYEE OR A CITY COUNCIL MEMBER? YES NO.

IF YES, NAME: _____ DEPARTMENT: _____

HOW DID YOU HEAR ABOUT THE GLENDALE YOUTH ALLIANCE? _____

AVAILABLE HOURS TO WORK (PLEASE CONSIDER SCHOOL SCHEDULE AND EXTRA-CURRICULAR ACTIVITIES):

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
START TIME:							
END TIME:							

CONVICTION INFORMATION MAY BE REQUESTED IF YOUR APPLICATION IS SELECTED AND YOU PROCEED WITH THE HIRING PROCESS.

MEDIA RELEASE FOR PROMOTIONAL/GYA USE: I HEREBY GIVE MY PERMISSION FOR THE USE OF ANY PHOTOGRAPHS AND VIDEOS THAT MAY BE TAKEN OF ME WHILE WORKING, OR PARTICIPATING IN MISCELLANEOUS ACTIVITIES RELATED TO THE GLENDALE YOUTH ALLIANCE. PLEASE INITIAL: _____

I HEREBY CERTIFY THAT ALL ANSWERS TO THE QUESTIONS ON THIS APPLICATION ARE TRUE, AND I AGREE AND UNDERSTAND THAT ANY MISSTATEMENTS OF MATERIAL FACTS OR OMISSIONS HEREIN WILL CAUSE FORFEITURE ON MY PART OF ALL RIGHTS TO ANY EMPLOYMENT IN THE SERVICE OF THE GLENDALE YOUTH ALLIANCE.

APPLICANTS SIGNATURE: _____ PARENT OR GUARDIAN'S SIGNATURE (IF APPLICANT IS A MINOR): _____