

2470 NORTH DECATUR, STE. 150 LAS VEGAS, NEVADA 89108 ATTN: HUMAN RESOURCES DEPARTMENT

EMPLOYMENT APPLICATION

Name					Social Secu	rity – Last 4 Digits	
Title of Position applying for:							
Address					Telephone Number		
Address Cit (a) A (7)					Fax		
City/State/Zip Previous U.S. Military Service Branch					E-mail		
Date Entered: Date Discharged: Entry Rank: Highest Rank Attained					U.S. Citizen:YesNo Permanent Resident Visa Eligible to Work in U.SYesNo		
Is any additional information relative to change of name, use of an assumed name necessary to enable a check of education or work history? Do you have any relatives currently working for the Las Vegas Urban League? Yes No If Yes, please give names and relationship Las Vegas Urban League ("LVUL") has zero tolerance for sexual abuse and/or molestation of any child and is committed to providing a safe and secure environment for all children, youth, members, guests, and volunteers. Child sexual abuse exploits and degrades children and can cause serious damage to cognitive, social, and emotional development of a child. As a society, we have a collective responsibility to prevent child sexual abuse. No adult who has been convicted of child abuse (either sexual abuse, physical abuse, or emotional abuse) should work with children or youth. Have you ever been convicted of, or pled guilty or no contest to, any Felony or Misdemeanor?YesNo If Yes, please give the date(s) and details							
F	DUCA	ATIO	N				
Name and Location of Institution Attended Graduate						Major	
High School	From	То	Yes	No			
College							
College							
Graduate School							
Other							
List Major areas of Competence							
EMPLO	VMEN	т ш	CTO!	ov.			
List employment be					ent		
Employer				F	From To		
Address				F	First Position		
City/State/Zip				F	Final Position		
Telephone No.				S	Starting Salary: \$ Per		
Supervisor's Name and Title				F	inal Salary:	\$ Per	
Duties							
Reason for Leaving							
May we contact your employer? Yes No							

Employer	From	То			
Address	First Position				
City/State/Zip	Final Position				
Telephone No.	Starting Salary: \$	Per			
Supervisor's Name and Title	Final Salary: \$	Per			
Duties	I				
Reason For Leaving					
Employer	From	То			
Address	First Position				
City/State/Zip	Final Position				
Telephone No.	Starting Salary: \$	Per			
Supervisor's Name and Title	Final Salary: \$	Per			
Duties					
Reason For Leaving					
REFERENCES Please do not include relatives					
Name	Title				
Address	Organization				
City/State/Zip	Phone Number				
Name	Title				
Address	Organization				
City/State/Zip	Phone Number				
Name	Title				
Address	Organization				
City/State/Zip	Phone Number				
Referred by:	Whon will you be evallable to start world				
What is the minimum salary you will accept? Will you accept a position anywhere in the United States?	When will you be available to start work? If not, please state geographical preference:				
will you accept a position anywhere in the office States:					
CERTIFICATION -APPLICATION REQUIRES CURRENT DATE AND ORIGINAL SIGNATURE					

I hereby certify that all information contained in this application and attachments are true and complete, and I agree and understand that any falsification, regardless of time of discovery, may cause forfeiture on my part of any employment. I understand that all information on this application is subject to verification and I consent to any and all background checks and drug test as it relates to this application. I also consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize use of information received in making an employment decision on my behalf.

Signature	Date