



Hoops for Hope

2911 Herring Avenue #22, Suite 200 | Waco, TX 76708
HoopsForHopeInternational@gmail.com | 254-498-9393

Application for Employment

Date _____

NAME _____

ADDRESS _____
Street, City, State, Zip

PHONE (cell/other) _____ PHONE (home) _____

E-MAIL ADDRESS _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

Are you a U.S. Citizen? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

If yes, please provide contact name and information. _____

Have you been convicted of a felony or a crime involving violence or the theft of property within the last 5 years?

Yes No If yes, please explain.

(Such a conviction is not an automatic bar to employment. Any information supplied regarding the circumstances, rehabilitation and age at the time will be considered. You may attach additional information you want considered.)

Position for which you are applying _____

Date you would be available _____

Special training/experience _____

EDUCATION

High School _____
Name of School and Location / Year Graduated

College/University _____
Name of School and Location / Year Graduated

Degree / Honors Received _____

Other Certifications _____

CURRENT AND FORMER EMPLOYERS

List below your last three employers, starting with the most recent.

| | | |
|---|-----------------------|-----------------|
| Employer, Location & Phone Number _____ | | |
| Your Position _____ | Your Supervisor _____ | |
| Dates of Employment: From _____ | To _____ | Last Wage _____ |
| Reason for Leaving _____ | | |

| | | |
|---|-----------------------|-----------------|
| Employer, Location & Phone Number _____ | | |
| Your Position _____ | Your Supervisor _____ | |
| Dates of Employment: From _____ | To _____ | Last Wage _____ |
| Reason for Leaving _____ | | |

| | | |
|---|-----------------------|-----------------|
| Employer, Location & Phone Number _____ | | |
| Your Position _____ | Your Supervisor _____ | |
| Dates of Employment: From _____ | To _____ | Last Wage _____ |
| Reason for Leaving _____ | | |

REFERENCES (Other than relatives)

Name, Location & Phone Number _____

Name, Location & Phone Number _____

Name, Location & Phone Number _____

ADDITIONAL INFORMATION

Use the space below if you wish to volunteer additional information you feel may be helpful to us in considering your application.

NOTE: Please carefully read the statements below. After you have read them, please sign in the space provided.

I certify that the facts contained in the application and in any resume or other material provided to Hoops for Hope and in any oral statements by me are true and complete to the best of my knowledge. I understand that, if employed, omissions, incomplete statements or false statements on this application or other materials supplied to Hoops for Hope or in oral statements by me in the hiring process shall be grounds for dismissal.

I authorize a background check of public records, investigation of all statements contained herein and authorize the employers and references listed herein to give you any and all information concerning my previous employment and any pertinent information they have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I UNDERSTAND AND AGREE THAT, IF HIRED:

1. MY EMPLOYMENT IS FOR NO DEFINITE PERIOD BUT MAY BE TERMINATED BY HOOPS FOR HOPE AT ANY TIME WITHOUT ANY PRIOR NOTICE AND WITHOUT CAUSE.
2. NO OFFICER OR EMPLOYEE OF HOOPS FOR HOPE CAN GUARANTEE ME EMPLOYMENT FOR ANY PERIOD OF TIME OR ANY SPECIFIC SALARY BENEFITS EXCEPT BY A WRITTEN EMPLOYMENT AGREEMENT.
3. I WILL COMPLY WITH ALL RULES, REGULATIONS AND POLICIES OF HOOPS FOR HOPE. I UNDERSTAND THESE RULES, REGULATIONS AND POLICIES ARE NOT A CONTRACT AND MAY BE CHANGED OR WAIVED BY HOOPS FOR HOPE AT ANY TIME.

SIGNED _____ DATE _____