



EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Information

Employer:

Coaching Corps, 310 8th St., Oakland, CA 94607

It is the policy of Coaching Corps to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status. See our advertisement for our full statement on this.

We currently do not have an electronic applicant tracking system, so we appreciate your patience in filling out this form through printing and writing. Please print legibly.

2. Applicant Information

Applicant Full Name:

City/State/Zip: (no street address please, this is only to check remote status)

Email Address:

Preferred phone for call backs:

3. Emergency Contact

Who should be contacted if you are involved in an emergency while interviewing with us?

Contact Name:

Relationship to you:

Daytime phone:

Evening phone:

4. Job Position Applied For:

5. Who referred you to our company? _____

Where did you find the job posting? Please list here: _____

Do you have any friends or relatives who work here? If yes, please list here:

6. Have you applied to our company previously?

_____ Yes

_____ No

If yes, when?

7. Are you at least 18 years old?

_____ Yes

_____ No

8. If you are offered employment, when would you be available to begin work?

9. If hired, are you able to submit proof that you are legally eligible for employment in the United States?

_____ Yes

_____ No

10. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation?

_____ Yes

_____ No

What reasonable accommodation, if any, would you request? This form is for HR.

11. Applicant's Skills

Check those skills that you have. Enter the *number of years of experience* and circle the number which corresponds to your ability for each particular skill. (One, 1, represents beginner/needs to learn, while five, 5, represents exceptional ability.)

Ability or Skill Years of Experience Rating (please answer all that apply):

Microsoft Office Excel (One, 1, represents beginner/needs to learn, while five, 5, represents exceptional ability.)

of years: _____

Proficiency Level: 1 2 3 4 5

Comments _____

Microsoft Office PowerPoint (One, 1, represents beginner/needs to learn, while five, 5, represents exceptional ability.)

of years: _____

Proficiency Level: 1 2 3 4 5

Comments _____

Distilling/translating data into visuals for an audience (One, 1, represents beginner/needs to learn, while five, 5, represents exceptional ability.)

of years: _____

Proficiency Level: 1 2 3 4 5

Comments _____

Event/meeting planning (One, 1, represents beginner/needs to learn, while five, 5, represents exceptional ability.)

of years: _____

Proficiency Level: 1 2 3 4 5

Comments _____

Could you give an example of the impact or a result you directly contributed to when utilizing internet research?

Comments/Details: _____

How many years fluency in utilizing remote meeting software (e.g., Zoom, Ring Central, or similar software)?

of years: _____

Proficiency Level: 1 2 3 4 5

Comments/Details on which one _____

Do you have any experience in youth development and/or after-school programming?

yes ___ no ___ Comments/Details: _____

13. Applicant Employment History/Previous Work or Volunteer/Internship experience

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application. Please do not answer "see resume" and feel free to use an additional paper if needed.

Employer Name:

Supervisor Name:

Address if known:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates of Employment (Month/Year):

Employer Name:

Supervisor Name:

Address:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates of Employment (Month/Year):

Employer Name:

Supervisor Name:

Address:

City/State/ZIP:

Job Duties:

Reason for Leaving:

Dates of Employment (Month/Year):

14. Applicant's Education and Training

College/University Name and Address

Did you receive a degree?

Yes

No

Not yet/currently attending

If yes, degree(s) received/or on track to receive: _____

If yes, GPA: _____

High School/GED Name and Address

Did you receive a degree?

Yes

No

If yes, GPA: _____

Other Training (graduate, technical, vocational, internships, relevant volunteer):

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements:

Military Service:

Yes No

Branch:

15. References

List any two non-relatives who would be willing to provide a reference for you regarding your work and skills related to this position.

Name:

Address:

City/State/ZIP:

Telephone:

Relationship:

Name:

Address:

City/State/ZIP:

Telephone:

Relationship:

16. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Coaching Corps to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

There will be a separate authorization for background checks after a conditional offer has been made, if applicable.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE: _____

DATE: _____

See next page for Voluntary Self-ID to be maintained separately.

EEO-1 Voluntary Self Identification Form

The Equal Employment Opportunity Commission (EEOC) requires all private employers with 100 or more employees as well as federal contractors and first-tier subcontractors with 50 or more employees AND contracts of at least \$50,000 complete an EEO-1 report each year. Covered employers must invite employees to self-identify gender and race for this report. While Coaching Corps is not required to do this by law, we aim to improve our recruitment efforts through gathering this information when possible.

Completion of this form is voluntary and will not affect your opportunity for employment, or the terms or conditions of your employment. This form will be used for EEO-1 reporting/or recruiting metric purposes only and will be kept separate from all other personnel records only accessed by the Human Resources department.

Please return completed forms to the HR department with your application via email to careers@coachingcorps.org.

If you choose not to self-identify your race/ethnicity at this time, the organization may determine this information by visual survey and/or other available information.

NAME: _____
JOB TITLE: _____
DATE COMPLETED: _____

GENDER:
(Please check one of the options below)
 Male Female Non-binary Prefer not to disclose

RACE/ETHNICITY:
 Asian or Pacific Islander
 Black or African American
 Hispanic or Latino
 Native American or Alaskan
 White or Caucasian
 Multiracial or Biracial
 A race/ethnicity not listed here.
 I do not wish to disclose.