

StandUpGirl.com Foundation, Inc.
 215 N. Meridian St. Suite 206
 Newberg, OR 97132
 www.standupgirlfoundation.org
 503-554-5683



APPLICATION FOR EMPLOYMENT

Application Instructions: Please complete all items in this application. If a question does not apply to you, insert "N/A" in the space provided. You may use additional sheets of paper to expand on any question. If you have already answered a question in a resume' or cover letter, simply refer to the appropriate document in the space provided.

APPLICANT INFORMATION											
Last Name					First			M.I.		DOB:	
Street Address								Apartment/Unit #			
City					State			ZIP			
Phone					E-mail Address						
Date Available					Desired Salary						
Are you a citizen of the United States?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Are you holding or have you already signed a contract for next year with another employer?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes please explain:					
Have you ever worked under a different name for any of the employers you've listed?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes please explain:					
EDUCATION											
High School					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma				
College					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Post College					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

PROFESSIONAL REFERENCES

If previous supervisors are not able to provide a reference, please give 3 references that are qualified to speak about your professional training and experience.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

VOLUNTEER HISTORY			
Organization		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Organization		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Organization		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
PERSONAL REFERENCES			
If previous supervisors are not able to provide a reference, please give 3 references that are qualified to speak about your pro-life experience. One of the references should be your current Pastor. Please do NOT use family members as references.			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

ADDITIONAL QUESTIONS - USE ADDITIONAL PAPER IF NEEDED

1) How long have you been pro-life, and what things influenced you to believe in this position?

2) After reading the Mission Statement and Statement of Faith for the StandUpGirl.com Foundation, are there any areas you feel conflict with your values or morals?

Please be specific. YES ☐ NO ☐

3) Do you have any personal commitments that might limit your ability to perform the duties of the position offered?

Please be specific. YES ☐ NO ☐

I understand that StandUpGirl.com Foundation does not discriminate in its employment practices against any person because of race, color, national or ethnic origin, gender, age, or qualified disability. The Foundation also does not discriminate in its practices of the services being offered.

I understand that employment with StandUpGirl.com Foundation is at will. This means that employment can be terminated, with or without cause, and with or without notice, at any time, at the option of StandUpGirl.com Foundation, or at the option of the employee.

I understand that this is only an application for employment and that no employment relationship is being offered at this time.

I hereby certify that the facts set forth in this application process are true and complete to the best of my knowledge. I understand that falsification of any statement or a significant omission of fact may prevent me from being hired, or if hired, may subject me to immediate termination regardless of the time elapsed before discovery. If I am terminated under these circumstances, I further understand and agree that I will be paid and receive benefits only through the day of release, as required by law.

I certify that I have carefully read and understand the statements above.

Applicant's Name (Please Print)

Applicant's Signature

Date