

EMPLOYMENT APPLICATION

VIBES IS AN EQUAL OPPORTUNITY EMPLOYER

Thank you for your interest in becoming an employee of VIBES Fine & Performing Arts (VIBES). VIBES is an enrichment studio for all ages to experience the art of creating and performing music through Kindermusik, summer camp, band, orchestra, drumline, master classes, recitals, jazz combos, private lessons, and much more. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors. **Employees must be 18 years of age or older**.

WHAT YOU'LL NEED

VIBES requires each applicant to submit the following items along with a completed application:

- 1. Resume/CV
- 2. A completed employment application
- **3. Transcripts/Diploma** (If you are unable to attain transcripts or diploma before turning in the application, please show proof at request. Please understand that this is a condition of employment)

APPLICATION			
Position(s) for which you are applying: .			
How did you hear about this position?			
Last name:	First:	Middle:	
Street address:			
City, State, Zip:			
Mailing address (if different from above):			
Cell phone:		Alternate phone:	
Email address:			
When will you be available to begin work	?		
Are you legally eligible for employment in	the United States?	☐ Yes ☐ No	
Are you bilingual? ☐ Yes ☐ No			
If yes, in what language(s) are you	ı fluent?		
Are you available to work:	ull-time 🗆 P	art-time	
Hours/ Days Not Available:			
Are you willing to use your car for job rela	ited travel, with the	understanding that you would receive mile	eage
reimbursement? \square Yes \square No			
Are you willing to use your own laptop or	tablet for your owr	use in your classes or lessons?	□No
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Are you willing to attend out-of-town workshops for continuing educati Have you ever been terminated or asked to resign from a job? If yes, please explain:	Yes 🗆 No)	
Are you able to perform the essential functions of the position, as definithe job description, without presenting a danger to yourself or others, without reasonable accommodations?		□ Yes	□ No
Do you have any pending or prior criminal arrests and charges related to child sexual abuse?*		☐ Yes*	□ No
Do you have any convictions related to other forms of child abuse and/or neglect?*		□ Yes*	□ No
Have you ever been convicted of any law violation? Include any pleas of "guilt" or "no contest." Exclude minor traffic violations.	F	□ Yes*	□ No
* Answering "Yes" to any of these questions disqua	alifies you from	employme	ent.
REFERENCES List below the names and addresses of persons qualified to answer ques INCLUDE FAMILY MEMBERS)	stions concern	ng your wo	ork abilities. (DO NOT
1. Name:	Phone:		
Address:	Occupation:		
2. Name:	Phone:		
Address:	Occupation:		
3. Name:	Phone:		
Address:	Occupation:		



EMPLOYMENT HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.

Company name:			Phone:			
		to:				
Starting wage:		End wage:	(circle one) HOUR	WEEK	MONTH	ANNUAL
Your job title and resp	onsibilities:					
Reason for leaving: _						
Company name:			Phone:			
		to:				
		•	(circle one) HOUR			
Reason for leaving: _						
Company name:			Phone:			
Employed (MM/YY):	from:	to:				
			(circle one) HOUR	WEEK	MONTH	ANNUAL
Your job title and resp	onsibilities:					
Reason for leaving: _						

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER.





SKILLS

Please list any applicable specialized skills, instruments and provelates to the job for which you are applying.	ficiency level, curriculum knowledge, especially as it
EDUCATION	
High School	
Name of school:	Location:
Years completed:	
Vocational School	
Name of school:	
Course of study:	_ Years completed:
Did you graduate or receive a certificate? ☐ Yes ☐ No	
Degree or certificate:	
Junior College	
Name of school:	
Course of study:	_ Years completed:
Did you graduate or receive a certificate? ☐ Yes ☐ No Degree or certificate:	
Undergraduate College	
Name of school:	Location:
Course of study:	
Did you graduate? Yes No Degree Awarded: _	•
Graduate College	
Name of school:	Location:
Course of study:	Years completed:
Did you graduate? ☐ Yes ☐ No Degree Awarded: _	
Military Service	
Branch:	
Rank at discharge:	_ Type of discharge:
If other than honorable, please explain:	
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AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

This application for employment will remain active for a limited time. Ask the organization's representative for details.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

i nave read, understand, and by my signature consent to these statements.	
Applicant Signature	Date
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