



Jewish Community Center of Northern Virginia  
 School-Age Services Department  
 2017-2018 School Year  
 BASE Staff Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)

Grade in school as of Sept. 2017 (if applicable): \_\_\_\_\_ Age: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Home Address/City/State/Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Certifications (circle all that apply): **CPR**      **WSI**      **FIRST AID**      **PMAT**      **EMAT**      **MAT**  
 Expiration date: \_\_\_\_\_

***BASE shifts in the AM run from 7:20am-9:10am and in the PM from 2:45pm-6pm.  
 Please check days and times you are available to work:***

	Mondays	Tuesdays	Wednesdays	Thursdays	Fridays
AM BASE 7:20-9:10					
PM BASE 2:45-6:00					

Are you interested in driving the JCC bus for either an AM or PM route?:      \_\_\_ YES AM/PM      \_\_\_ NO  
 Are you interested in working Early Release Days (12:30-6pm)?:      \_\_\_ YES      \_\_\_ NO  
 Are you interested in working Vacation Days (multiple shifts available 7:30am-6pm)?:      \_\_\_ YES      \_\_\_ NO

Please list any previous or current work experience where you have been employed as a staff member:

1. Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_  
 Supervisors Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_  
 Supervisors Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

3. Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_  
 Supervisors Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**If you are NOT a returning BASE Staff Member, please answer the following questions:**

1. Do you have experience working with children? If not, what compels you to want to do so?

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2. Why do you feel you are qualified for the position for which you are applying?

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3. If your best friend was filling out this application for you and was asked to write down three adjectives to describe you, what would they write?

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4. Please list any skills, hobbies or interests that you feel would make you a good fit in working at BASE:

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5. Please list any other commitments you may have during the year, i.e., sports, clubs, jobs, etc.:

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6. Is this your first job? If so, what are your expectations? If not—what are your expectations?:

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7. How did you hear about the BASE Program?

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8. Is there anything else you'd like to share with us about yourself?

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**Please list the names and contact information of 3 professional references (non-family members preferred):**

1. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use Only**

Date Received: \_\_\_\_\_

References have been checked: \_\_\_\_\_

Interview Date: \_\_\_\_\_

CS: \_\_\_\_\_

Comments: