



...igniting powerful change in the lives of urban youth

FORTRESS YOUTH DEVELOPMENT CENTER

712 E STELLA ST * FORT WORTH, TX 76104 * (817) 335-1007 * FAX (817) 335-5748 * WWW.FORTRESSYDC.ORG

APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT, AND ANSWER ALL QUESTIONS

Date ____ / ____ / ____

Name: _____
Last
First
Middle

Mailing Address: _____ () _____
Street Number
Work Phone

_____ () _____
City/State/ZIP Code
Home Phone

_____ () _____
Cell Phone

Email: _____

Position(s) applied for: _____

PART-TIME FULL-TIME TEMPORARY

Referral :

FRIEND RELATIVE FORTRESS YDC STAFF Other _____

OFFICE SKILLS

List software programs you have used and your competence with each: _____

Other skills: _____

EDUCATION

	High School	College/University	Graduate/Professional
SCHOOL NAME			
ADDRESS			
YEARS COMPLETED	9 10 11 12	1 2 3 4	1 2 3 4
DIPLOMA/DEGREE			
COURSE OF STUDY			
Describe any specialized training, apprenticeships, skills, honors, and extra-curricular activities.			

NAME: _____

Please take a moment to answer the following questions that will help us evaluate our compatibility.

MINISTRY INTERESTS / CHURCH AND SPIRITUAL BACKGROUND

A. Are you currently attending church? YES NO

B. If yes, where? _____

C. How long have you attended this particular church? _____

PERSONAL INFORMATION

A. Are you in the active military reserves? _____ If so, are you subject to call up? _____

B. Have you been convicted of a felony within the last seven years? YES NO If so, when? _____
(Conviction will not necessarily disqualify you from employment.)

BIOGRAPHICAL INFORMATION

Please use a separate sheet if needed.

1. Describe your involvement in church and other Christian service.

2. Describe what you want to accomplish and the vision you have for serving with Fortress.

3. List participation, membership, and offices held in associations, organizations, societies, fraternities/sororities, government, sport and/or church groups. Also include honors, awards, achievements, and published articles in college or profession publications.

NAME: _____

REFERENCES

Please give names, addresses, and phone numbers of four references who may be contacted. If any of the categories do not apply, please substitute an additional name. Please do not include relatives, fiancé(e), or spouse.

1.

Name _____ Length of Acquaintance _____

Address _____ Phone () _____

City _____ State/ZIP Code _____

2.

Name _____ Length of Acquaintance _____

Address _____ Phone () _____

City _____ State/ZIP Code _____

3.

Name _____ Length of Acquaintance _____

Address _____ Phone () _____

City _____ State/ZIP Code _____

NAME: _____

EMPLOYMENT EXPERIENCE Starting with your current or last job, list your past four employers.

Employer _____ Dates Employed _____ / _____ to _____ / _____
Address _____ Phone () _____
Job Title _____ Work Performed _____
Supervisor _____
Reason for Leaving _____
To whom should the reference form be addressed? _____

Employer _____ Dates Employed _____ / _____ to _____ / _____
Address _____ Phone () _____
Job Title _____ Work Performed _____
Supervisor _____
Reason for Leaving _____
To whom should the reference form be addressed? _____

Employer _____ Dates Employed _____ / _____ to _____ / _____
Address _____ Phone () _____
Job Title _____ Work Performed _____
Supervisor _____
Reason for Leaving _____
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Employer _____ Dates Employed _____ / _____ to _____ / _____
Address _____ Phone () _____
Job Title _____ Work Performed _____
Supervisor _____
Reason for Leaving _____
To whom should the reference form be addressed? _____

I hereby certify that the information contained in this application and any attachments is true to the best of my knowledge and agree to have any of the statements checked by Fortress Youth Development Center, unless I have indicated to the contrary. I authorize the references listed in this application to provide Fortress Youth Development Center. any and all information concerning my previous employment and any pertinent information that they may have. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I am hired, in my dismissal from employment.

Applicant's Signature _____ Date _____

Please complete the entire application package and return with your resume to:
Fortress Youth Development Center
Attn: Terri Henson
P.O. Box 422
Fort Worth, TX 76101



FORTRESS YOUTH DEVELOPMENT CENTER

CORE PURPOSE: Providing opportunities for inner city children and youth to experience powerful life change in order to become productive Christian adults.

STRATEGY: Form authentic relationships with children and youth by equipping them with life skills using the best spiritual, emotional, social, physical, and educational resources available.

CORE VALUES

RELATIONALLY BASED

"Train up a child in the way he should go, and when he is old he will not turn from it."
(PROVERBS 22:6)

EMPOWERED BY JESUS

"But we have this treasure in jars of clay to show that this all-surpassing power is from God and not from us." (2 CORINTHIANS 4:7)

UNCONDITIONALLY COMMITTED

"The Lord is not slow in keeping his promise, as some understand slowness. He is patient with you, not wanting anyone to perish, but everyone to come to repentance." (2 PETER 3:9)

EFFICIENT AND EFFECTIVE

"For this reason, since the day we heard about you, we have not stopped praying for you and asking God to fill you with the knowledge of his will through all spiritual wisdom and understanding. And we pray this in order that you may live a life worthy of the Lord and may please him in every way: bearing fruit in every good work, growing in the knowledge of God."
(COLOSSIANS 1:9-10)

HOLISTIC

"I can do everything through him who gives me strength." (PHILIPPIANS 4:13)

CONCLUSION

Equipping children and youth with spiritual, social/emotional and academic resources will empower them to overcome their circumstances within generational poverty and build a solid foundation on which to ignite a relationship with Jesus Christ and grow as a child of God. Fortress Youth Development Center is dedicated to offering the best and most relevant developmental resources and opportunities to inner-city children and youth. This will create the basis for a long-term, intimate relationship to be built with a child and their family.



Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name Fortress Youth Development Center		
Contact Name Terri Henson			
Agency's Main Phone Number 817-335-1007		Agency's Fax Number 817-335-5748	

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)			Maiden or Other Name(s) Used	
Current Address				
City		State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number		State Issued
Position Applied For				
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Race Other <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/>		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VERIFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)

