

APPLICATION FOR WEAVERS OF LOVE EXECUTIVE DIRECTOR

Please keep in mind the **Vision** and **Mission** of the Weavers of Love Organization:

VISION STATEMENT: "To provide homemade food during the day to families in need, along with nutrition counseling and other supportive services."

MISSION STATEMENT: "Weavers of Love is a non-profit, 501 (c) (3) organization that provides healthy and nutritious meals to the hungry, the poor, the elderly and those in need. WOL also serves needy individuals from the Kingsville and surrounding areas with nutrition counseling and other supportive services."

NAME: _____ **E-MAIL:** _____

ADDRESS: _____

OCCUPATION: _____ **PHONE#:** _____

Best time to contact you? _____ a.m./p.m.

If you are under 18 years of age, can you provide proof of eligibility to work? Y/N

Are you currently employed? Y/N

May we contact your current employer? Y/N

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Y/N

Are you available to work part time? ___ Full time? ___ Temporary? ___ (check all that apply)

Are you currently on "layoff" status and subject to recall? Y/N

When are you available to start? _____

Can you travel if the job requires? Y/N

Do you own a vehicle? Y/N

Please provide a resume which indicates Educational and professional experience as well as three (professional references).

Please list all skills which would make you a good fit for this position:

Please list any specialized skills which would be of benefit to the position of executive director (e.g. word processing/computer skills, accounting skills, management skills) :

Tell us why you are applying for this position, and share any additional information you feel may be helpful to us in considering your application:

Please list any volunteer organizations with which you have previously worked and dates of service:

Applicant's statement:

I certify that answers provided are true and complete.

I authorize investigation of all statements contained in this application for employment as my be necessary in arriving at decision to offer employment.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, meaning that either party (employer or employee) may terminate the employment relationship at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

