



APPLICATION FORM JOB READINESS PROGRAM Pathway Technology Campus

Date// mm dd yyyy	
First Name	Middle Initial Last Name
Gender □ Female □ Male	Age □ -15 □ 16-18 □ 19-25 □ 26-35 □ 36-50 □ 51+
Date of Birth// mm dd yyyy	Nationality US Citizen Other
Residential Address	Primary Phone Number
	Alternative Phone Number
E-mail Address	
How did you find about the	e program?
Why are you interested in	the program?
willy are you interested in	program:
Have you ever participated	d in any PTC program? □ Yes □ No
Are you enrolled in Bunke	r Hill Community College? □ Yes □ No
Are you available Mondays	s and Wednesdays (2 to 5pm)? □ Yes □ No
I am □ employed □ unemployed	□ seeking part-time employment□ seeking full-time employment
Do you have a resume?	Yes □ No
Have you ever made a cov	er letter? □ Yes □ No
Have you ever applied for	a job on-line? □ Yes □ No
Have you ever had an info	rmal interview/job interview? □ Yes □ No
Have you ever worked? (Please supply your work ex	Yes □ No perience in the back of the page)





Work experience - Please fill out as much as possible

Employer's Name or Place	
Address	
Position	Pay rate\$ □ Hour □ Salary
How many hours per week did you work?	How long did you work there?
Beginning of employment//	Ending of employment/
mm dd yyyy	mm dd yyyy
Employer's Name or Place	
Address	
Position	Pay rate\$ □ Hour □ Salary
How many hours per week did you work?	How long did you work there?
Beginning of employment//	Ending of employment/
mm dd yyyy	mm dd yyyy
Employer's Name or Place	
Address	
	Pay rate\$ □ Hour □ Salary
How many hours per week did you work?	How long did you work there?
Beginning of employment//	Ending of employment//
mm dd yyyy	mm dd yyyy
I hereby declare that all the informatio	n I have supplied in the Application Form is
accurate to the best of my knowled provided will not be shared.	dge, and understand that the information
Signature	Date//

REMEMBER TO HAND OR EMAIL YOUR APPLICATION TO: IBA (405 Shawmut Ave. Boston MA. 02118) BY 5pm JANUARY 20, 2012