The Kansas Youth Empowerment Academy (KYEA) educates, mentors, supports, and promotes youth with disabilities to dream and achieve their goals of self-sufficiency and community leadership. KYEA is searching for an Executive Director who will blaze a path for staff and youth to follow. This person needs to honor, respect, and value the KYEA culture, which includes high expectations for all youth with disabilities. This person must believe in every person’s ability to achieve the goals they choose no matter what obstacles lie in their path. KYEA does not discriminate based on race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age, disability, veteran status, or any other characteristic protected under applicable federal, state, or local laws.

# Executive Director Employment application

## Application information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  |  | Date: |  |  |
|  |  | Last | First | M.I. |  |  |  |  |
| Address: |  |  |  | Phone: |  |  |
|  |  | Street address | Apt/Unit # |  |  |  |  |
|  |  |  |  | Email:  |  |  |
|  |  | City | State | Zip Code |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date Available: |  |  |  |  |  | Desired salary:  |  |  |
|  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States? |  | Yes ☐ | No ☐ |  |  |
|  |  |  |
| If no, are you authorized to work in the U.S.? |  | Yes ☐ | No ☐ |  |  |
|  |  |  |
| Have you ever worked for this company? |  | Yes ☐ | No ☐ |  | If yes, when? |  |  |
|  |  |  |
| Have you ever been convicted of a felony? |  | Yes ☐ | No ☐ |  | If yes, explain? |  |  |

## Education

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| High school: |  |  |  | Address: |  |  |
|  |  |  |
| From: |  |  |  | To:  |  |  |  | Did you graduate? | Yes ☐ | No ☐ |  | Diploma: |  |  |
|  |  |  |
| College: |  |  |  | Address: |  |  |
|  |  |  |
| From: |  |  |  | To:  |  |  |  | Did you graduate? | Yes ☐ | No ☐ |  | Degree: |  |  |
|  |  |  |
| Other: |  |  |  | Address: |  |  |
|  |  |  |
| From: |  |  |  | To:  |  |  |  | Did you graduate? | Yes ☐ | No ☐ |  | Degree: |  |  |

## References

Please list three professional references.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  |  | Relationship: |  |  |
|  |  |  |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Email: |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  |  | Relationship: |  |  |
|  |  |  |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Email: |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full name: |  |  |  | Relationship: |  |  |
|  |  |  |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Email: |  |  |

## Previous Employment

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Supervisor: |  |  |
|  |  |  |
| Job title: |  |  |  | From: |  |  |  | To: |  |  |
|  |  |  |
| Responsibilities: |  |  |
|  |  |  |
| May we contact your previous supervisor for a reference? |  |  | Yes ☐ |  | No ☐ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Supervisor: |  |  |
|  |  |  |
| Job title: |  |  |  | From: |  |  |  | To: |  |  |
|  |  |  |
| Responsibilities: |  |  |
|  |  |  |
| May we contact your previous supervisor for a reference? |  |  | Yes ☐ |  | No ☐ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company: |  |  |  | Phone: |  |  |
|  |  |  |
| Address: |  |  |  | Supervisor: |  |  |
|  |  |  |
| Job title: |  |  |  | From: |  |  |  | To: |  |  |
|  |  |  |
| Responsibilities: |  |  |
|  |  |  |
| May we contact your previous supervisor for a reference? |  |  | Yes ☐ |  | No ☐ |

## Military Service

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Branch: |  |  |  | From: |  |  |  | To: |  |  |
|  |  |  |
| Rank at discharge: |  |  |  | Type of discharge: |  |  |
|  |  |  |
| If other than honorable, explain: |  |  |

## Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature: |  |  |  | Date: |  |  |