



Expression of Interest Form

3Strands Global Foundation Employ + Empower Program

Contact Information

If you are interested in getting a job with the help of 3Strands Global's Employ + Empower Program, please fill out the following information and email this form to Sarah Consoli, the Program Manager, at **sarahc@3sgf.org**. You can also text a picture of the form to **916-905-1242**. We will be in contact with you within 2 weeks!

First Name: _____ Last Name: _____

Age: _____ Birthday: _____

Phone Number: (_____) - _____ - _____ *(Make sure to let us know if it changes!)*

Email: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Best ways to reach you? *(check all that apply)* Email Phone Call Text

Program/Agency Referring You: _____

Program Director or Case Manager Name: _____

Program Director or Case Manager Phone: (_____) - _____ - _____

Program Director or Case Manager Email: _____

How long have you received services from this program/agency? _____

Emergency Contact Name: _____

Emergency Contact Relationship to You: _____

Emergency Contact Phone: (_____) - _____ - _____



Employment Information

There are many different job opportunities that 3Strands Global's Employ + Empower Program can refer you to, depending on your availability, work experience, the area you live in and your career interests. Fill out the information below to help us better determine what job opportunity could be a good fit for you!



What is your primary form of transportation? Bus Light Rail Car
 Other: _____

Do you have prior job experience? Yes No

If yes, please list your most recent previous employment:

Job Title & Employer: _____

Start and End Date (month and year): _____

What type of job are you looking for? Part-Time Full-Time Either

Approximately how many hours do you want to work each week? _____

What are your preferred work hours (check all that apply):

Weekdays from 9am-5pm

Weeknights from 4:30pm-10:30pm

Weekend Days from 9am-5pm

Weekend Nights from 4:30pm-10:30pm

I certify that the information contained on this form is correct to the best of my knowledge.

Your Signature: _____ Date: ____ / ____ / ____