# **Application For Employment**

The Company is an equal opportunity employer. Applications are considered for employment without regard to race, color, creed, religion, age, sex, national origin, marital status, military status or any other basis prohibited by law, unless such basis constitutes a bona fide occupational qualification.

## PERSONAL INFORMATION

Date:	Daytime phone :				
(Full Legal) Nan	ne:				
Address:					
City:		State:	Zip:		
Position applyin	g for:				
Expected Comp	ensation:				
Age Group Pref	erence:				
Are you over 18	years old?	Are you	ı over 21 years ol	d?	
Are you available to work Full Time Part-Time Temporary					
Please list hour	s you are availat	ole below:			
Monday	Tuesday	Wednesday	Thursday	Friday	
			-		
		ted?	Yes No		
On what date w	ould you be avai	ilable to start wor	k?		
Have you ever	filed an application	on with the Comp	any before?	Yes No	
If yes, give date		<u>.</u>			
	been employed l		pefore?Ye	es No	

Have you been convicted of a felon	y or misdemeanor (other than a minor traf
violation)?Yes No	Conviction will not necessarily disqualify applicant from employ
Person who should be notified in ca	ase of emergency
(Name, Relationship, Address, Pho	ne Number)?
PERSONAL REFERNCES	
TEROORAL REFERENCES	
	one number of three references who are n
List the name, address, and telepho	
List the name, address, and telephorelated to you and are not previous	
List the name, address, and telephorelated to you and are not previous  Name:	employers.
List the name, address, and telephorelated to you and are not previous  Name:  Address:	employers. Phone
List the name, address, and telephorelated to you and are not previous  Name:  Address:  Name:	employers. Phone Phone
List the name, address, and telephorelated to you and are not previous  Name:  Address:  Name:	employers. Phone
List the name, address, and telephorelated to you and are not previous Name:  Address:  Name:  Address:  Address:	employers.  Phone  Phone  Phone  Phone
List the name, address, and telephorelated to you and are not previous Name:  Address:  Name:  Address:  Address:	employers. Phone Phone
List the name, address, and telephorelated to you and are not previous  Name:  Address:  Address:  Name:  Address:  Address:	employers.  Phone Phone Phone Phone

#### **EMPLOYMENT RECORD**

Starting with your present or most recent job, list your employment experiences for at least the past 10 years relating to childcare first. You may include job-related military service assignments and volunteer activities that reflect your qualifications for employment.

Employer	Employment dates	Kind of Work Performed:
Address	From	
Telephone	To Salary/Hourly Rate	
( )	Salary/Hourly Rate	
Job Title	Starting	Reason for leaving
Immediate Supervisor	Final	
Employer	Employment dates	Kind of Work Performed:
Address	From	
	То	
Telephone	Salary/Hourly Rate	
( )	Ct-din	Reason for leaving
Job Title	Starting	Reason for leaving
Immediate Supervisor	Final	
Employer	Employment dates	Kind of Work Performed:
Address	From	
	То	
Telephone	Salary/Hourly Rate	
( )		
Job Title	Starting	Reason for leaving
Immediate Supervisor	Final	
May the company contact	the employers listed above?	Yes No
	s) you do NOT wish the com that we do not contact the e	

## **GENERAL INFORMATION**

### **STANDARD QUESTIONS**

What importance do they play in teaching young children?
What is your personal philosophy of a childcare program?
What makes a successful childcare program?
What are your special skills, talents and abilities that you would bring to this program?

Applicant's Statement
(Please indicate that you have read and you understand each paragraph of the Applicant's Statement by

•	placing your initials beside	each paragraph)	
	I certify that this application was cominformation in it are TRUE and COM event of employment, I understand the omitted information in my application	PLETE to the best of my knowledge nat any false, misleading inaccurate	e. In the
	I authorize the Company, or its agenthis application, including interviewin employers listed. This inquiry may ingeneral reputation, and personal chawork performance and workplace co	g the personal references and past nclude information as to my charact gracteristics, as well as information	ter,
	I hereby release all parties, including and employees, my personal referen employers, from any and all liability f resulting from furnishing any informa action based on any such informatio	ices, medical providers and previou or any injury or damage, or claim thation to the Company concerning me	is nereof,
	I agree to submit to a medical exami understand that any offer of employr examination.		of that
	I hereby authorize any doctor, hospit to furnish any medical information re consideration of this application. I un medical records is revocable, in writing	garding me as may be necessary for derstand that this consent of releas	or the
	I understand that according to federal a condition of employment produce and United States citizen status or, if the United States. As a consequence by the Company would be contingent documentation within the time period	certain documentation to verify their f aliens, their legal authorization to ver e, I understand that any offer of em- it upon my ability to produce the rec	r identity work in ployment
	I understand that this application is remployment and that any resulting e of time and is terminable at any time me. I further understand that statement practices, handbooks, or other Compemployment and the Company has to policies, practices, benefits plans or requirement imposed by law. I under has the authority to enter into any agmake any agreement contrary to the	employment relationship is for no fix and for any reason by the Compar- ents which may be contained in pol- pany material do not create any gua- the right to modify, amend or termin other programs within the limits and estand that no representative of the preement for any specific period of the	ed period ny or by icies, arantee of aate d Company
Signature of A	oplicant	Date	
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