



Application for Employment

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Personal

Last Name	First	Middle	Date
Street Address			Home Telephone
City, State, Zip			Business/Cell Telephone
Have you ever applied for employment with us? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes: Month and year ___/___			Social Security #
Position Desired			Pay Expected
Are you available for full-time work? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, what are your available work hours? _____ Are you available to work a split shift? _____			Will you work overtime if asked? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you CPR certified? Y / N Are you first Aid Certified? Y / N			When will you be available to work?
Are you an experienced van or bus driver?			
Other special training or skills(languages, computer skills, etc)			

Education

School	Name and location of School	Course of Study	# of years completed	Did you graduate?	Degree or Diploma
High School					
Trade or Technical School					
College					

Membership in Professional or Civic Organizations

Employment

Please give accurate, complete full-time and part-time employment record. Start with your most recent employer.

Company Name	Telephone
Address	Employed (Month and Year) From To
Name of Supervisor	Weekly Pay
State job title and describe your work	Reason for Leaving

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We may contact above employers to verify employment. List below any employers you do not want us to contact. Indicate the reason you do not want us to contact them.

Please write a short description of the reasons you would like to work in childcare.
