

APPLICATION FOR EMPLOYMENT

Last Name	First	Name		Middle Initial	
Address	City	State	Zi	p Code	
Telephone Number(s)					
Birth Date if under 18 years of a	age				
If you are under 18 years if age required proof of your eligibility	• •		Yes	No	
Have you ever filed an applicati	on with us be If Yes, give		Yes	No	
Have you ever been employed	with us before If Yes, give		Yes	No	
Are you currently employed?			Yes	No	
May we contact your present er	mployer?		Yes	No	
Are you prevented from lawfully employed in this country becau Visa or Immigration Status?	se of		Yes		
On what date would you be ava	ilable for wor	k?			
Are you available to work:	Full Time _	Part Tim	neTem	porary	
Are you currently on "lay-off" state to recall?	atus and subj		Yes	No	
Have you ever been convicted of If Yes, please explain			Yes	No	

EDUCATION

SCHOOL	YEARS ATTENDED	NAME OF SCHOOL	CITY/ STATE	COURSE DEGREE HOURS
HIGH SCHOOL				
COLLEGE				
OTHER CHILD CARE TRAINING				

EXPERIENCE

NAME & ADDRESS OF EMPLOYER	DATE FROM	DATE TO	JOB DUTIES

State any additional information you feel may be helpful to us in considering your application.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

____Yes ____No

I understand I am required to be electronically finger printed. _____ Yes

I have received a Child Abuse Record Information (CARI) form and given permission for a CARI check. ____Yes

REFERENCES

1.			
	Name	Phone Number	
	Address		
2.			
	Name	Phone Number	
	Address		
3.			
	Name	Phone Number	
	Address		

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I have received and read the center's policy on the discipline of children	Yes
I have received and read the Information to Parents Document.	Yes

Signature of Applicant

Date