

Application for Employment



Personal Information

Name _____

Date _____

Address _____

Home Phone Number _____

Cell Phone Number _____

Social Security Number _____

Are you 18 years or older? _____

Marital Status _____

Referred By _____

Education Information

High School Attended _____

Graduation Date _____

College _____

Graduation Date _____

Degree _____

General Information

What experience do you have working with children?

What age children have you worked with? _____

Are you looking for Full or Part time work? _____

What hours are you available to work? _____

What hourly wage are you seeking? _____ Date you can start? _____

Position Applying For _____

Have you ever been convicted of a felony? _____ If yes, please explain _____

Do you have anything on your abuse/neglect background screening that would prohibit you from working with children? _____

Please list the names and ages of your children: _____

Work References (No Relatives Please)

Name _____ Relationship _____

How long have you known this person? _____ Phone _____

Name _____ Relationship _____

How long have you known this person? _____ Phone _____

Employment History

Present Employer _____

Phone _____ Address _____

Dates Employed _____ Reason for leaving? _____

Supervisor's Name _____ May we contact your employer? _____

Current Rate of Pay _____ Position Held _____

Duties/Responsibilities _____

Previous Employer _____

Phone _____ Address _____

Dates Employed _____ Reason for leaving? _____

Supervisor's Name _____ May we contact your employer? _____

Current Rate of Pay _____ Position Held _____

Duties/Responsibilities _____

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company.

Signature_____

Date_____

Do not write below this line, for office use only.

Contacted_____

Date of Interview_____

Time of Interview_____

Hired_____ Start Date_____ Pay Rate_____ Position_____