

# APPLICATION FOR EMPLOYMENT

## PERSONAL INFORMATION:

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

SS#: \_\_\_\_\_ TDL: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## EMPLOYMENT DESIRED:

Position: \_\_\_\_\_ Start Date: \_\_\_\_\_ Salary: \_\_\_\_\_

Hours: ( ) Full Time ( ) Part Time ( ) Substitute

If part time, what days and hours (Monday-Friday)? \_\_\_\_\_

Currently Employed: ( ) Yes ( ) No May we contact your Employer? ( ) Yes ( ) No

Day Care Experience: \_\_\_\_\_ years Are you 18 years of age or older? ( ) Yes ( ) No

Do you have a Commercial Driver's License? ( ) Yes ( ) No

Are you willing to obtain one? ( ) Yes ( ) No

**Have you ever been convicted of a Felony or Misdemeanor?** ( ) Yes ( ) No

If yes, explain: \_\_\_\_\_

**Do you have children that will need to attend the center?** ( ) Yes ( ) No

If so, please list ages: \_\_\_\_\_

**Employment:** List your last three employers, starting with present or most recent.

Company Name:	Telephone:( )
Address:	Employment Date:
Name of Supervisor	Job Title:
Describe your work:	Reason for Leaving:
Company Name:	Telephone:( )
Address:	Employment Date:
Name of Supervisor	Job Title:
Describe your work:	Reason for Leaving:
Company Name:	Telephone:( )
Address:	Employment Date:
Name of Supervisor	Job Title:
Describe your work:	Reason for Leaving:

**Education:**

High School: \_\_\_\_\_ Last grade completed: \_\_\_\_\_ Year Graduated: \_\_\_\_\_  
GED: \_\_\_\_\_

Name of College/Colleges	Courses/Degree

**Do you have the following? :**

First Aid Training: ( ) Yes ( ) No Date Received: \_\_\_\_\_ Expiration: \_\_\_\_\_

CPR Training: ( ) Yes ( ) No Date Received: \_\_\_\_\_ Expiration: \_\_\_\_\_

**Please list any other child development related experience/special credentials you feel may enhance your work. (Other training workshops)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Child Care Development Experience:**

Check all that apply:

( ) Public school teaching Age level: \_\_\_\_\_

( ) Working in a child care center kindergarten, Head Start program, etc..

Describe your duties: \_\_\_\_\_

**Are you flexible and cooperative with your hours and work assignment?**

( ) Yes ( ) No Because \_\_\_\_\_

**Do you take directions well from others? ( ) Yes ( ) No**

What age group do you feel most comfortable with? \_\_\_\_\_



**OFFICE USE ONLY:**

Interviewer: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Remarks:

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Neatness: \_\_\_\_\_

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Ability: \_\_\_\_\_

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Hired: \_\_\_\_\_ Department: \_\_\_\_\_

Position: \_\_\_\_\_ Start Date: \_\_\_\_\_

Salary: \_\_\_\_\_