

EMPLOYMENT APPLICATION



NURSERY, PRESCHOOL & LEARNING CENTER

DATE: _____ POSITION APPLYING FOR: _____ SALARY DESIRED: _____

HOW DID YOU HEAR ABOUT THIS JOB OPPORTUNITY? _____

LAST NAME: _____ FIRST NAME: _____ MIDDLE: _____

SOCIAL SECURITY#: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ OTHER: _____

AVAILABILTY: FULL-TIME PART-TIME MON TUES WED THURS FRI SAT

EDUCATION: HIGHEST GRADE COMPLETED: _____ GED DIPLOMA SOME COLLEGE DEGREE

NAME OF SCHOOL ADDRESS	DATES ATTENDED	DEGREE RECEIVED	MAJOR

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES (PLEASE EXPLAIN BELOW) NO

EXPLANATION: _____

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REFERENCES:

NAME	ADDRESS	PHONE	RELATIONSHIP

COOKS: ATTACH COPY OF FOOD HANDLERS CARD EXPIRATION DATE: _____

DRIVERS: ATTACH A CURRENT DMV RECORD LESS THAN 30 DAYS OLD

DRIVERS LICENSE # _____ STATE OF ISSUE _____ TYPE OF LICENSE _____

HAVE YOU HAD ANY ACCIDENTS IN THE PAST 3 YEARS? _____ HOW MANY? _____

HAVE YOU HAD ANY MOVING VIOLATIONS IN THE LAST 3 YEARS? _____ HOW MANY? _____

ARE YOU CPR/FIRST AID CERTIFIED? _____ EXPIRATION DATE: _____

ARE YOU A US CITIZEN? _____ IF NOT ARE YOU LEGALLY ALLOWED TO WORK IN THE US? _____

EXPERIENCE:

LIST EXPERIENCE FOR THE PAST 7 YEARS

MAY WE CONTACT YOUR EMPLOYERS: YES _____ NO _____

NAME OF EMPLOYER: _____ SUPERVISOR: _____

ADDRESS: _____

EMPLOYMENT DATES: _____ JOB TITLE: _____

STARTING SALARY _____ ENDING SALARY _____

REASON FOR LEAVING? _____

DUTIES: _____

NAME OF EMPLOYER: _____ SUPERVISOR: _____

ADDRESS: _____

EMPLOYMENT DATES: _____ JOB TITLE: _____

STARTING SALARY _____ ENDING SALARY _____

REASON FOR LEAVING? _____

DUTIES: _____

NAME OF EMPLOYER: _____ SUPERVISOR: _____

ADDRESS: _____

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ADDRESS: _____

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DUTIES: _____

NAME OF EMPLOYER: _____ SUPERVISOR: _____

ADDRESS: _____

EMPLOYMENT DATES: _____ JOB TITLE: _____

STARTING SALARY _____ ENDING SALARY _____

REASON FOR LEAVING? _____

DUTIES: _____

**ATTACH ANY CERTIFICATES, DIPLOMAS, OR TRAININGS
THAT WILL SUPPORT YOUR QUALIFICATIONS FOR THE POSITION.**

CERTIFICATION:

Each Application Requires Current Date and Original Signature

I hereby certify that all entries on all pages and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment at Steppin Stones Preschool, LLC. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent that you may contact references, former employers and educational institutions listed regarding this application. I further authorize Steppin Stones Preschool, LLC to rely upon and use, as it sees fit, any information received from such contacts. Information contained on this application may be disseminated to other agencies, nongovernmental organizations or systems on a need-to-know basis for good cause shown as determined by the agency head or designee.

Date: _____ Signature _____

If you are not hired for the position can we put you on the substitute listing? YES NO