



**Employment Record (list most recent employment first). Please attach resume if available.**

Start Date	End Date	Employer Name & Address	Initial Position Title
Start Salary	End Salary	Last Supervisor's Name Phone #	Final Position Title
Position Description		May we contact this employer? YES <input type="checkbox"/> NO <input type="checkbox"/>	Reason For Leaving

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**References**

Name	Phone Number	Job Title/Relation
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	Name & Address of School	Course of Study	Years Completed	Type of Degree or Diploma
Elementary School				
High School				
Undergraduate College				
Graduate School/ Other(Specify)				

Indicate any foreign languages you can speak, read, and/or write			
	Fluent	Good	Fair
Speak			
Read			
Write			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities(music, dance, arts...).

Describe any job-related training received in the United States military.

Summarize special job related skills and qualifications acquired from employment or other experiences.

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

What attracted you to our center?

What age group(s) would you prefer to work with? (check all that apply) (1=most preferred....4=least preferred)
<input type="checkbox"/> Infants (6 weeks-18 months) <input type="checkbox"/> Toddlers (18 months-3 years) <input type="checkbox"/> Preschoolers (3-5 years) <input type="checkbox"/> Afterschool Program (Pre-K-Kindergarten)

What are your expectations/goals for this job?

Have you worked with children before?      YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES:
Briefly describe your experience.(setting, situations, etc.)
What did you enjoy about this experience?
What did you find most difficult about this experience?
What age children have you worked with?

**Applicant's Statement**

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 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.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

For Personnel Department Use Only			
Arrange Interview	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Remarks			
Employed	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Date of Employment
Job Title	Hourly Rate/Salary		

Notes