



Employment Application

Full Name:	Phone:	Birth Date:
Address:	City	State Zip Code
Social Security #:	Driver's License #:	Email:

GENERAL INFORMATION					
Employment Desired: <input type="checkbox"/> Full-time only <input type="checkbox"/> Part time only <input type="checkbox"/> Full or Part time <input type="checkbox"/> On Call/Substitute					
Position Desired: _____			Hourly Rate Desired: _____		
Hours available: Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____					
Do you have a current FBI Clearance?		Yes	No		
Do you have a current CPR certification?		Yes	No		
Do you have a current First Aid certification?		Yes	No		

EMPLOYMENT HISTORY (begin with most recent)				
Employment Dates Start Date/End Date	Employer/Address	Supervisor's Name & Phone#	Job Title and Duties	Reason for leaving
		May we contact Supervisor? Yes No		
		May we contact Supervisor? Yes No		
		May we contact Supervisor? Yes No		
		May we contact Supervisor? Yes No		

EDUCATION

School Name/Address	Did You Graduate?	Major
High School:	Yes No	
College/University	Yes No	
College/University	Yes No	

Early Childhood Studies/Child Development

How many total units do you have in Early Childhood Studies/Child Development? _____

Are you presently enrolled in Early Childhood Studies/Child Development courses? Yes No
If so, which courses?

PERSONAL REFERENCES (do not list family or previous employers)

Name	Email Address	Phone Number	Relationship

I hereby certify that all information contained in this application is true and correct. I understand that any misrepresentation, falsification, or consequential omission of information may render this application void, or if employed may result in immediate termination. I further consent and agree to submit to any job related medical exams or drug tests that might be required and agree to provide any information that may be needed to facilitate such tests. I authorize the individuals and institutions named above to give information regarding my employment, character, and qualification, hereby releasing them from all liability for issuing such information.

Signature of Applicant

Date