

The Growing Tree Child Care Center Application for Employment

Applicants are considered without regard to race, color, religion, sex, national origin, age, marital status, veteran status, or the presence of a non-job related medical condition or handicap.

APPLICANT INFORMATION			
Last Name:	First Name:	M.I.	Date:
Street Address:		Apt #:	
City:	State:	Zip Code:	
Phone Number:		E-mail Address:	
Date Available:	Social Security #:	Hourly Rate:	
Position Applying For:		Are you willing to work overtime?	
Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S? Yes No			
Have you ever worked for this company?			
Have you ever been convicted of a felony? If yes, explain			

EDUCATION		
High School:	Address:	
From To	Did you graduate?	
College:	Address:	
From To	Did you graduate?	Degree:
Pediatric CPR/First Aid Training Yes No	If yes, expiration date:	
Criminal History Clearance Yes No If yes, expiration date:	Child Abuse Clearance Yes No If yes, expiration date:	FBI Background Check Yes No If yes, expiration date:
Fire Safety Training: Yes No If yes, expiration date:	NSOR clearance completed Yes No	

REFERENCES	
<i>Please list 3 professional references that we may contact.</i>	
Full Name:	Relationship:
Company:	Phone #:
Address:	
Full Name:	Relationship:
Company:	Phone #:
Address:	
Full Name:	Relationship:
Company:	Phone #:
Address:	

PREVIOUS EMPLOYMENT			
Company:		Phone #:	
Address:		Supervisor:	
Job Title:	Starting Hourly Wage:	Ending Hourly Wage:	
Responsibilities:			
From:	To:	Reason for leaving:	May we contact your previous employer for a reference? Yes No
Company:		Phone #:	
Address:		Supervisor:	
Job Title:	Starting Hourly Wage:	Ending Hourly Wage:	
Responsibilities:			
From:	To:	Reason for leaving:	May we contact your previous employer for a reference? Yes No
Company:		Phone #:	
Address:		Supervisor:	
Job Title:	Starting Hourly Wage:	Ending Hourly Wage:	
Responsibilities:			
From:	To:	Reason for leaving:	May we contact your previous employer for a reference? Yes No
Company:		Phone #:	
Address:		Supervisor:	
Job Title:	Starting Hourly Wage:	Ending Hourly Wage:	
Responsibilities:			
From:	To:	Reason for leaving:	May we contact your previous employer for a reference? Yes No

I hereby attest that all information on this application is accurate to the best of my knowledge.

X

Applicant Signature: