



# Employment Application

We are an Equal Opportunity Employer

Today's Date:		Date available to start:	
Name: FIRST		MIDDLE	LAST
Address:			
City/State/Zip:		County:	
Cell phone:	Home:	E-mail:	
Position desired: Teacher___ Aide___ Management___ Seasonal___ Full time___ Part-time___			
Anticipated salary or hourly wage:			
Are there any days and/or times that you are not available? MON___ TUE___ WED___ THUR___ FRI___			
Are you legally eligible for employment in the U.S.? YES___ NO___		Soc. Security #: <small>(Optional)</small>	
Are you at least 18 years of age? YES___ NO___		Date of Birth:	
How did you hear about us?			

## EDUCATION

SCHOOL NAME AND LOCATION	DATES ATTENDED	COURSE OF STUDY	DEGREE/DIPLOMA
High School:	To		
Educational, Vocational Schools:	To		
	To		
College or University:	To		
	To		
Graduate or Professional:	To		
	To		

## CHILD CARE TRAINING COMPLETED IN THE LAST THREE YEARS

First Aid, CPR, CDA, ITS-SIDS, etc.


**EXPERIENCE WITH GROUPS OF CHILDREN**  
Indicate ages of children, duties, years of experience.


**WORK HISTORY**

List your last five jobs, beginning with your present employer and including a 10-year employment history.

Current or Last Employer:		Address:	
Job Title:	Supervisor's Name:	May we contact employer? YES ____ NO ____ Phone Number:	
Start Date:	End Date:	Starting Rate:	Ending Rate:
		Full Time ____ Part-Time ____ Hours per week: ____	
Duties:			
Reason for leaving:			

Previous Employer:		Address:	
Job Title:	Supervisor's Name:	May we contact employer? YES ____ NO ____ Phone Number:	
Start Date:	End Date:	Starting Rate:	Ending Rate:
		Full Time ____ Part-Time ____ Hours per week: ____	
Duties:			
Reason for leaving:			

Previous Employer:		Address:	
Job Title:	Supervisor's Name:	May we contact employer? YES ____ NO ____ Phone Number:	
Start Date:	End Date:	Starting Rate:	Ending Rate:
		Full Time ____ Part-Time ____ Hours per week: ____	
Duties:			
Reason for leaving:			

Previous Employer:		Address:	
Job Title:	Supervisor's Name:	May we contact employer? YES ____ NO ____ Phone Number:	
Start Date:	End Date:	Starting Rate:	Ending Rate:
		Full Time ____ Part-Time ____ Hours per week: ____	
Duties:			
Reason for leaving:			



**ADDITIONAL QUESTIONS**

Briefly state your philosophy on child education and development:

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Give an example of a challenging situation you have faced in a classroom with a child and how you handled it.

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Describe ways that you communicate with parents.

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Special skills or additional information about you which we should consider:

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