

EMPLOYMENT APPLICATION



DIRECTIONS

- Please complete entire application even if resume is attached.
- Type or print using black ink.
- If you need additional space, use back of application or attach a supplemental sheet.
- Sign your completed application.

GENERAL INFORMATION

NAME (last) _____ (first) _____	Social Security Number _____	DATE OF APPLICATION _____
PRESENT ADDRESS (street, city, state, zip code) _____	PHONE (daytime) _____	PHONE (evening) _____
DATE OF BIRTH _____	ALTERNATE PHONE # _____	EMAIL ADDRESS _____

Are you legally eligible to work in the United States? YES NO (Proof of citizenship or immigration status will be required upon employment)

Are you 18 years of age or older? YES NO If NO, can you supply working papers? YES NO

Have you ever been convicted of any criminal offense other than minor traffic violations? YES NO
*A criminal conviction will be considered only in relation to the job for which you are applying. Seriousness and nature of the offense, time elapsed, and rehabilitation will be taken into account. **Notwithstanding, no person may be a staff member of a daycare center who has been convicted of a crime against children.***

Do you have an indicated report of child abuse, maltreatment or neglect? YES NO

POSITION

TYPE OF POSITION DESIRED

Assistant Director <input type="checkbox"/>	Lead Teacher <input type="checkbox"/>	Assistant Teacher <input type="checkbox"/>	Classroom Aide <input type="checkbox"/>	Support Services (Cook, Bus Driver, Cleaning, Maintenance) <input type="checkbox"/>
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DATE AVAILABLE _____	SALARY DESIRED \$ _____	ARE YOU SEEKING: Full-Time Part-Time Temporary	SPECIFY DESIRED PERIOD OF WORK AND/OR HOURS PER DAY: _____
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Please describe your specific job interests which pertain to employment at A Brighter Day Quality Center:

No person shall be denied employment on the basis of any legally prohibited discrimination involving, but not limited to, race, color, creed, religion, national or ethnic origin, sex, sexual orientation, age or handicap. **Employment is contingent upon furnishing evidence of identity and employment eligibility.**

A Brighter Day Quality Learning Center

EMPLOYMENT RECORD (list most recent employment first) Please attach resume if available.

START DATE	END DATE	EMPLOYER NAME & ADDRESS	FINAL POSITION TITLE	INITIAL POSITION TITLE
START SALARY	END SALARY	LAST SUPERVISOR'S NAME	PHONE #	
POSITION DESCRIPTION		MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING

START DATE	END DATE	EMPLOYER NAME & ADDRESS	FINAL POSITION TITLE	INITIAL POSITION TITLE
START SALARY	END SALARY	LAST SUPERVISOR'S NAME	PHONE #	
POSITION DESCRIPTION		MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING

START DATE	END DATE	EMPLOYER NAME & ADDRESS	FINAL POSITION TITLE	INITIAL POSITION TITLE
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POSITION DESCRIPTION		MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		REASON FOR LEAVING

EDUCATION AND TRAINING

COLLEGE, UNIVERSITY OR TECHNICAL SOCIAL	# OF YEARS ATTENDED	GRADUATED?		TYPE OF DEGREE OR DIPLOMA?	MAJOR AREA OF STUDY	NAME OF SCHOOL:
		YES	NO			CITY, STATE:

COLLEGE, UNIVERSITY OR TECHNICAL SOCIAL	# OF YEARS ATTENDED	GRADUATED?		TYPE OF DEGREE OR DIPLOMA?	MAJOR AREA OF STUDY	NAME OF SCHOOL:
		YES	NO			CITY, STATE:

HIGH SCHOOL	# OF YEARS ATTENDED	GRADUATED?		TYPE OF DEGREE OR DIPLOMA?	MAJOR AREA OF STUDY	NAME OF SCHOOL:
		YES	NO			CITY, STATE:

OTHER (e.g., business, etc.)	# OF YEARS ATTENDED	GRADUATED?		TYPE OF DEGREE OR DIPLOMA?	MAJOR AREA OF STUDY	NAME OF SCHOOL:
		YES	NO			CITY, STATE:

LIST OTHER SKILLS AND TRAINING YOU CONSIDER RELEVANT TO EMPLOYMENT AT A BRIGHTER DAY QUALITY LEARNING CENTER

LIST ANY PROFESSIONAL ORGANIZATIONS, ASSOCIATIONS, HONORS, CERTIFICATIONS, PROFESSIONAL LICENSES AND PUBLICATIONS YOU CONSIDER SIGNIFICANT. PLEASE INDICATE THE PROFESSIONAL LICENSE NUMBER AND STATE OF ISSUANCE.

PROFESSIONAL REFERENCES

(List 3 persons, other than relatives or personal friends, who have knowledge of your work and/or education.)

NAME	MAILING ADDRESS	PHONE

STATEMENT

I hereby authorize investigation of all statements in this application including references. I certify that such statements are true, and understand that Misrepresentation or omission of facts called for in this form is cause for termination of employment without notice. I also agree, if employed, to abide by all regulations of A Brighter Day Quality Learning Center.

SIGNATURE: _____ DATE: _____

Name: _____ Today's Date: _____

What attracted you to our Center?

What age group(s) would you prefer to work with? (Rank in order of preference, 1-4)
(1= most preferred..... 4=least preferred)

- Infants (8weeks -18 months)
- Toddlers (18 months - 3 years)
- Pre-K (3-5 years)
- School Age (K-5)

What are your expectations/goals for this job?

Do you have any particular skills or talents that you'd like to utilize at ABDQLC (such as music, dance, arts, languages.....)? Please explain.

Have you worked with children before? YES NO

If YES:

Briefly describe your experience. (Setting, situation, etc.)

What did you enjoy about this experience?

What did you find most difficult about this experience?

What age children have you worked with?

Is there anything else you would like to add?

What hours are you available? (ABDQLC's hours of operation are M-F 6:30 a.m. – 6:30 p.m.)

Mondays:

Tuesdays:

Wednesdays:

Thursdays:

Fridays:

Would you be willing to assist in the kitchen periodically? { } YES { } NO