



APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without discrimination based upon race, color, religion, sex, national origin, marital status or disability. Please answer all questions completely and accurately. Incomplete applications may be rejected.

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NUMBER
_____			_____()_____
PRESENT STREET ADDRESS			HOME TELEPHONE
_____			_____()_____
CITY, STATE, ZIP CODE			OTHER TELEPHONE

If you have lived at the above address for less than one (1) year, list your previous address:

Are you over 18? Yes No

Have you previously applied for a position with Stages Childcare Center before? Yes No
 If yes, when and what position? _____

Are you legally eligible for employment in the United States? Yes No

Are you related to anyone currently working at Stages Childcare Center? Yes No
 If yes, please list name and relationship: _____

Have you ever worked under a different last name than currently used? Yes No
 If yes, please state name: _____

Have you ever been convicted of any crime (misdemeanor or felony) or had a determination related to child abuse or neglect and/or unlawful sexual offenses? Yes No
 If yes, indicate date(s) of conviction(s) and type(s) of offense(s): _____

Have you ever been investigated by child protective services or any comparable entity regarding your ability to work with children..... Yes No
 If yes, please explain _____

Falsification, misrepresentation and/or omission of criminal conviction are grounds for refusal to hire or, if hired, for dismissal.
*** NOTE: A conviction does not automatically disqualify an applicant from employment.**

EMPLOYMENT INFORMATION

Position applied for: _____ Salary expectations: _____

Full-Time Part-Time Summer Temporary Substitute Other _____

Circle Days Available to Work: M T W TH F Times Available to Work: _____

Date Available to Start: _____

EDUCATION & TRAINING

EDUCATION	<u>NAME & LOCATION</u>	<u>NUMBER OF YEARS COMPLETED</u>	<u>DID YOU GRADUATE?</u>	<u>DEGREE / DIPLOMA</u>
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Graduate, Business, Technical, etc)				

List any lifesaving or other emergency medical training courses you have completed. Please provide dates of completion:

Membership in professional or civic organizations (exclude those which may disclose race, color, religion or national origin):

MILITARY SERVICE

Include U.S. military active duty and reserve duty.

Have you ever been a member of the Armed Forces of the United States? Yes No, if no go to next section

From: _____ To: _____

Branch of service: _____ Rank: _____

Please list military occupational skills: _____

EMPLOYMENT

In applying here for employment, it is understood that are required to contact past employers regarding references.

Are you employed now? Yes No

May we currently contact your present employer? Yes No

Have you ever been terminated, suspended or placed on probation for performance on your job? Yes No

If yes, please explain: _____

Do you have any part- or full-time jobs that you would expect to continue during your employment here? Yes No

If yes, please describe: _____

EMPLOYMENT HISTORY

**Include at least the past 3 years, beginning from most recent.
List all experiences (including volunteer) in which you worked directly with children.
(attach separate sheet if necessary)**

Company name:	Telephone (include area code):
Address:	Employed (month and year): From: To:
Supervisor:	Compensation: Start: Last:
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:
Company name:	Telephone (include area code):
Address:	Employed (month and year): From: To:
Supervisor:	Compensation: Start: Last:
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:
Company name:	Telephone (include area code):
Address:	Employed (month and year): From: To:
Supervisor:	Compensation: Start: Last:
Job Title:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
Describe your work:	Reason for leaving:

If you need additional space, please attach a separate sheet of paper. In addition, if you have a resume, please provide a copy with this application.

CERTIFICATION

Please read carefully. If you have any questions regarding this statement, please discuss them with the Director before signing.

“I certify that the information contained in this application, and accompanying resume, if any, is true and complete to the best of my knowledge and understand that falsification, misrepresentation and/or omission of information is grounds for refusal to hire or, if hired, dismissal. I authorize any persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, and/or any other information that they may have, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you.”

“In the event of my employment, I agree to conform to the rules and regulations of Stages Childcare Center and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by Stages Childcare Center at any time, at Stages Childcare Center option and without prior notice to me. **I understand that this employment application and any other Stages Childcare Center documents are not contracts for employment, and that my employment and compensation will be employment at will and can be terminated at any time, with or without cause and with or without notice, at the option of either Stages Childcare Center or myself.**”

“I understand that Stages Childcare Center may require me to undergo a pre-placement physical and drug screen test by medical staff and/or agent approved by Stages Childcare Center as a condition of my employment and/or continued employment. I further understand that if a drug test is required I must successfully pass the drug test to be considered for employment at Stages Childcare Center. I understand that medical examinations and drug screens (random, lost time accidents, and just cause) which are job-related and consistent with Stages Childcare Center business necessity may be required of me once I am employed. I further release Stages Childcare Center including all of its officers, agents, representatives and employees from any and all claims, suits, causes of action, liability and damages associated with or arising from my submission to a drug test and/or medical examination. I also understand that Stages Childcare Center maintains a nonsmoking environment.

_____ APPLICANT’S SIGNATURE

_____ DATE

FOR MANAGEMENT USE ONLY

_____ FULL TIME _____ PART TIME _____ NO HIRE

HIRE DATE: _____

EFFECTIVE START DATE: _____

EFFECTIVE BENEFIT DATE: _____
(FULL TIME EMPLOYEES ONLY)

COMMENTS: _____

HIRING AUTHORITY SIGNATURE _____