

APPLICATION FOR EMPLOYMENT

			DA	[E	
PRESENT A	DDRESS				
HAVE YOU	APPLIED WITH THIS COMPANY	BEFORE?	IF SO, WHEN	ę	
ARE YOU 18	B OR OLDER?POSITI	ON APPLYING F	OR		
	4GEHOURS & I	DAYS YOU CAN	WORK		
LOCATIONS	YOU ARE WILLING TO WORK				
Central					
DATE YOU C	CAN STARTR	FERRED BY			
HIGH SCHO	OL			_DID YOU GRADUATE	
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LIST ANY AN	D ALL CHILDCARE JOBS AND	OR RESPONSIB	ILITIES THAT INVO	OLVE CARING FOR CHILDREN TH	АĨ
YOU CONDU	JCTED AT PREVIOUS PLACES C	OF EMPLOYMENT	AND/OR FOR F	AMILY OR FRIENDS	
					
					_
PRESENTEMP	'LOYER			HOW LONG	
WHY ARE YO	U LEAVING YOUR PRESENT EM	PLOYMENT?	·····		
FORMER EMF					
FROM-TO	· · · · · · · · · · · · · · · · · · ·	SALARY	POSITION	REASON FOR LEAVING	

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REFERENCES (list three persons not related to you)

	NAME	PHONE NUMBER	How Do You Know This Person?
1			
2			
3			

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employer and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment, for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I further acknowledge that I received, read, understand, and agree to the Application Cover Letter prior to completing this application.

SIGNATURE

DATE

OFFICE USE ONLY (Do not write below this line)

REFERENCES CHECKED BY TELEPHONE ON	DATE and TIME
REMARKS	
]	
	1
2	
3	
	·
SIGNATURE OF PERSON CHECKING REFERENCES	

Revised 10/1/11