

# Walnut Christian Child Care Center

## Application for Employment



PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Address \_\_\_\_\_  
Number Street City State Zip

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Phone Number \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Day/Hours available to work:

Position applied for (1) \_\_\_\_\_  
 and salary desired (2) \_\_\_\_\_  
 (Be specific)

No Preference \_\_\_\_\_  
 Monday \_\_\_\_\_  
 Tuesday \_\_\_\_\_  
 Wednesday \_\_\_\_\_  
 Thursday \_\_\_\_\_  
 Friday \_\_\_\_\_  
 Saturday \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Can you work nights? \_\_\_\_\_

Employment desired: FULL-TIME ONLY PART-TIME ONLY FULL OR PART-TIME

When available to work? \_\_\_\_\_

TYPE OF SCHOOL	NAME OF SCHOOL	ADDRESS	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus or Trade School				
Professional School				

Emergency Contact Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Do you have children in your home? \_\_\_\_\_ If you have children in the home, do you have care for them while you work? \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

**Work Experience**

Please list your work experience with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer Address City, State, Zip Code Phone Number	Name of last supervisor	Employment Dates	Pay or Salary
		From	Start
		To	Final
Your last job title:			
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

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		From To	Start Final
	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Have you ever been charged with, convicted of or pled guilty to a criminal offense? \_\_\_\_\_  
 If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s), was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you in good physical, mental, and emotional health?                      YES                      NO  
 In the past five years, have you been under the care of a physician or other professional for any physical, mental, or emotional illness?                      YES                      NO  
 If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where do you attend church? \_\_\_\_\_ Are you a member? \_\_\_\_\_

May we contact your present employer?                      YES                      NO

Please read and initial the following:

\*\* I understand that any misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. \_\_\_\_\_

\*\* I understand that if hired, I must submit to a criminal background check. \_\_\_\_\_

Please return the three reference forms, completed, with your application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for completing this application form and for your interest in our center.**