

APPENDIX P SAMPLE EMPLOYMENT APPLICATION

APPLICATION FOR EMPLOYMENT

Personal Information	
Name:	Date of Application:
<i>Last</i>	<i>First</i>
<i>Middle</i>	
Address:	
<i>Street</i>	<i>(Apt.)</i>
<i>City, State</i>	<i>Zip</i>
Contact Information:	() ()
<i>Home Telephone</i>	<i>Mobile</i>
<i>Email</i>	
How did you learn about our company?	
Position Applying for:	Available Start Date:
Desired Pay Range:	

Education				
	Name and Location/Campus	Name while Enrolled	Degree Received	Major
High School				
College or University				
Specialized Training, Trade School, etc.				
Other Education				
Please list your certifications, special skills or other items that may contribute to your abilities in performing the above-mentioned position.				

Previous Experience

Please list all experience beginning with your most recent employer working your way back. If your experience extends beyond the space provided, please attach additional information on a separate sheet of paper or provide a copy of your most recent resume. Please note that only accredited schools and licensed child care centers will be considered when determining starting wage rate.

Dates Employed:	Company Name:	Location:	Role/Title:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Number:	Contact Person:
Job duties and tasks performed:			
Reason for leaving:			

Dates Employed:	Company Name:	Location:	Role/Title:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Number:	Contact Person:
Job duties and tasks performed:			
Reason for leaving:			

Dates Employed:	Company Name:	Location:	Role/Title:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Number:	Contact Person:
Job duties and tasks performed:			
Reason for leaving:			

Dates Employed:	Company Name:	Location:	Role/Title:
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Number:	Contact Person:
Job duties and tasks performed:			
Reason for leaving:			

References		
Professional References (Supervisors or Managers ONLY): Please provide current contact information for verification purposes.		
Name	Phone Number	Relationship
Personal References (No Relatives): Please provide current contact information for verification purposes.		
Name	Phone Number	Relationship

I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.

I understand that completion of this application does not guarantee that an interview will be conducted and does not constitute an offer of employment.

I understand that any offer of employment will be contingent upon the veracity of the information in this application, meeting qualifications for the position, passing an FBI fingerprint investigation, criminal background, and a negative drug screen.

I certify that I understand the information set forth above.

I certify that information contained in this application is true and complete.

Signature: _____ **Date:** _____

We are an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.