



# Employment Application

Date \_\_\_\_\_ Preferred Interview Times \_\_\_\_\_

**PERSONAL INFORMATION:**

Name \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

When can you begin work? \_\_\_\_\_

Current Employer \_\_\_\_\_ May we contact? \_\_\_\_\_

Hobbies/Interests \_\_\_\_\_

**EDUCATION:**

Name/Location

Dates Attended

Graduation Date/Major

High School/GED \_\_\_\_\_

College \_\_\_\_\_

Trade/Business \_\_\_\_\_

Do you speak any foreign language(s)? \_\_\_\_\_ Which language(s)? \_\_\_\_\_

**EXPERIENCE:** Former Employers: (List last three beginning with most recent)

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Position \_\_\_\_\_

Dates \_\_\_\_\_ Salary \$ \_\_\_\_\_ /Hr. May we contact? \_\_\_\_\_



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Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Position \_\_\_\_\_

Dates \_\_\_\_\_ Salary \$ \_\_\_\_\_ /Hr. May we contact? \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Position \_\_\_\_\_

Dates \_\_\_\_\_ Salary \$ \_\_\_\_\_ /Hr. May we contact? \_\_\_\_\_

**OTHER:**

Are you currently being charged with or have you ever been charged with a misdemeanor, a felony or been served any other indictment or official criminal complaint?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please give details including dates, types of charges and whether or not you were convicted: \_\_\_\_\_

We have attached our cell phone and smoking policies.

Are you willing to sign both of these policies? \_\_\_\_\_ Yes \_\_\_\_\_ No

*I certify that the information on this form is true and correct to the best of my knowledge. "Any applicant who knowingly or willingly makes a false statement of any material fact or thing in this application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and upon conviction thereof, shall be punished accordingly."*

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

**PERSONAL PHILOSOPHIES:**

What are the characteristics of a high quality early childhood program?

Which of these areas are you strongest in? In which areas are you weakest?

If you could only have five things in your classroom, what would they be?

Describe one of the most frustrating experiences you have had with children.

Describe one of the most satisfying experiences you have had with children.

What is your approach to classroom behavior and discipline?

Why do you feel you would be an asset to this school?



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Age Group Preference: (Rank from 1-5, 1 being first choice)

\_\_\_\_\_ Toddlers (1-3 years)                      \_\_\_\_\_ Preschoolers (3-4 years)  
\_\_\_\_\_ Pre Kindergarten (4-5 years)                      \_\_\_\_\_ School Age (5-11 years)  
\_\_\_\_\_ Teens (summer only 11-15 years)                      \_\_\_\_\_ No Preference

Are you willing to participate in continuing education and training beyond your regular preschool hours? \_\_\_\_\_ Yes      \_\_\_\_\_ No

If Yes, please list areas you would be interested in receiving more training on:

Describe any experience you have in childcare.

List any other experience you have had which would benefit the children in our program.

**REFERENCES:**

<u>Name</u>	<u>Phone or E-mail</u>	<u>Company or Address</u>	<u>Relationship or Position</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

***Thank you for applying. Feel free to attach a resume***