



1041 East Brockton
Redlands, CA 92374
(909) 792-2463

1643 Plum Lane
Redlands, CA 92374
(909) 792-9717

EMPLOYMENT APPLICATION

DATE: _____

PERSONAL

NAME LAST FIRST (M.I.) TELEPHONE

ADDRESS CITY ZIP

ARE YOU 18 YEARS OF AGE OR OLDER? YES NO EMAIL ADDRESS

HAVE YOU EVER BEEN EMPLOYED UNDER A DIFFERENT NAME? YES NO IF YES, PLEASE LIST ALL NAMES USED

DO YOU POSSESS A VALID CALIFORNIA DRIVER'S LICENSE? YES NO CDL NUMBER:

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? YES NO IF YES, EXPLAIN ON BACK OF FORM

NAME AND ADDRESS OF PERSON TO BE NOTIFIED IN CASE OF ACCIDENT OR EMERGENCY: TELEPHONE NUMBER:

POSITION

POSITION APPLYING FOR	SALARY EXPECTATION	DAYS/ HOURS AVAILABLE	DATE AVAILABLE TO WORK

PREVIOUS EMPLOYMENT (List most recent experience first. Use back of application if additional space is needed.)

NAME AND ADDRESS OF EMPLOYER	TELEPHONE NUMBER	JOB TITLE AND TYPE OF WORK	REASON FOR LEAVING	DATES	
				FROM	TO

EDUCATION

CHECK HIGHEST YEAR COMPLETED 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>	DIPLOMA/ GED <input type="radio"/> YES <input type="radio"/> NO	CURRENTLY ENROLLED IN HIGH SCHOOL COMPLETION COURSE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPECTED COMPLETION DATE _____
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EMPLOYMENT – RELATED EDUCATION COURSES

COURSE TITLE	NAME OF SCHOOL OR ORGANIZATION AND ADDRESS	NUMBER UNITS COMPLETED	DATE COMPLETED	CURRENTLY ENROLLED

PROFESSIONAL AND TECHNICAL QUALIFICATIONS

A. List any Degrees or Permits held:

B. Names of Professional Associations of which you are a member:

NOTES:

Multiple horizontal lines for taking notes.

REFERENCES

List names of persons willing to provide **professional** and/or character references

NAME	ADDRESS	TELEPHONE NUMBER	PROFESSIONAL REFERENCES (EMPLOYER, ETC.)

Please Read Carefully, Initial Each Paragraph and Sign Below:

Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize Redlands Day Nursery to thoroughly investigate my references, work record, education and other matters related to my suitability for employment unless otherwise specified above. I further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

I hereby certify under penalty of perjury that the above statements are true and correct. I give my permission for any necessary verification.

SIGNATURE OF APPLICANT

DATE