

**The Growing Place
A Ministry of First United Methodist Church**



Application for Employment

Applicant's Full Name: _____ Date: _____

Permanent Address: _____

City _____ State _____ Zipcode _____

Current Address (if different): _____

City _____ State _____ Zipcode _____

Telephone Number: _____ Day _____ Evening _____ Cell _____

Have you lived out of the state of Kentucky in the last 5 years? Y / N

If yes, please list the state(s) _____

Out of state address:

1. _____

2. _____

3. _____

Please use the back of the application for more listings.

Are there other names under which you have worked or attended school? Y / N

If yes, please list for reference checking purposes: _____

Have you ever been charged of a crime or felony? Y / N

Have you ever been convicted of a crime or felony? Y / N

Have you ever been dismissed from employment at a Child Care facility? Y / N

If you answered Yes to any of the 3 questions above, please explain: _____

Have you ever worked for the Growing Place before? Y / N

If yes, When? _____

Position Applying For: _____ Full or Part Time: _____

Available Start Date: _____ Salary Preference: _____

Days / Hours Available: _____

Why are you applying for this position? _____

Education:

School	Name & Location	# of Years	Major Subjects of Study	Diploma or Degree Rec'd?
High School				
College				
Graduate				
Other (Specify)				

Additional Training/Certification:

Please list any relevant training and/or certification received which you consider significant to employment in an early childcare/preschool setting. List the dates you attended, expiration date (if applicable), and organization that gave the training: _____

Please describe any other talents, skills, hobbies, volunteer activities, or other experiences that have contributed to your qualifications for the position applied for: _____

Employment History

Please list present or most recent employment first. Complete ever if accompanied by a resume.

Employer:	Position Title:	Start and End Date:
Supervisor's Name:	Phone Number:	Reason for Leaving:
Ending Salary:	May we contact this employer? Y / N	Duties/Responsibilities:

Employer:	Position Title:	Start and End Date:
Supervisor's Name:	Phone number:	Reason for Leaving:
Ending Salary:	May we contact this employer? Y / N	Duties/Responsibilities:

Employer:	Position Title:	Start and End Date:
Supervisor's Name:	Phone Number:	Reason for Leaving:
Ending Salary:	May we contact this employer? Y / N	Duties/Responsibilities:

Employer:	Position Title:	Start and End Date:
Supervisor's Name:	Phone Number:	Reason for Leaving:
Ending Salary:	May we contact this employer? Y / N	Duties/Responsibilities:

References

List three non-related references who can tell us about your work experience and your relationship with children:

Name:	Address	Phone Number	Relationship

Please Read Carefully and Sign:

1. All information contained in this application is true to the best of my knowledge. I understand that deliberate misrepresentations or omissions of any kind may result in denial of employment or be cause for disciplinary action, not excluding direct and immediate dismissal if I am hired.
2. I authorize The Growing Place, to contact any or all of my former employers and/or references for the purpose of verifying the information I have provided about myself or my employment. I voluntarily and knowingly fully release any person or organization that provides such information.
3. I understand that a drug screening may be required upon receiving a job offer from The Growing Place.
4. I understand that Kentucky Licensing for the weekday child care and preschool programs requires all individuals working in these programs to have on file at their workplace a current criminal record check, substantiated abuse form, and current TB skin test.
5. I understand that Licensing also requires that I complete Orientation Training within the first three months of employment. (Employees who have already had this training may submit a certificate of completion to receive credit for this requirement)

Applicant's Signature: _____ Date: _____

Thank you for your interest in The Growing Place

