

The Early Childhood Learning Center of Greene County
P.O. Box 399
South Cairo, NY 12482

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:		Date of Application:		
How Did You Learn About Us? __Advertisement __Friend __Walk-In __Employment Agency __Relative __Other: _____				
Last Name	First Name	Middle Name		
Address Number	Street	City	State	Zip Code
Telephone Number(s):				

Have you ever filed an application with us before? Yes No
If Yes, give date _____

Have you ever been employed by us before? Yes No
If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration will be required upon employment.

On what date would you be available for work? _____

Are you available for work... Full Time Part Time Either

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Do you have a valid driver's license? Yes No

CONVICTION STATEMENT

In accordance with Section 390-b(1)(a) of the Social Services Law, I certify that to the best of my knowledge and belief, (please circle one) **I Have;** **I Have Not** been convicted of a crime in New York State or any other jurisdiction. If I have been convicted of a crime, I will provide true and accurate information concerning the crime for which I was convicted, the date of conviction and any other relevant information in the space provided below. In addition, I will provide written justification on the back of this sheet, explaining why I should be allowed to have contact with children regardless of my conviction. ***I am aware that this will be my only opportunity for this explanation to be considered in the decision to approve or deny my employment.***

In accordance with Federal regulations, I certify that, to the best of my knowledge and belief, (please circle one) **I Have;** **I Do Not Have Any,**

- i) pending or prior criminal arrests and charges related to child sexual abuse and their disposition; or
- ii) convictions related to other forms of child abuse or neglect

If any, please explain: _____

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. YES _____ NO _____

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree *
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

***Attach a copy of latest Diploma/Degree Earned.**

Describe any specialized training, apprenticeship, job related skills and qualification.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protective status.

1. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving:				

2. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving:				

3. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving:				
State any additional information you feel may be helpful to us in considering your application.				

REFERENCES

(At least two professional, preferably Supervisors, and one personal- No Relatives)

Supervisor	Name:	Phone:
	Company:	
Supervisor	Name:	Phone:
	Company	
Personal	Name:	Phone:
	Relationship:	

I give ECLC permission to contact the above references and any former employers.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at employment decisions.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “*at will*” nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this “*at will*” employment relationship may not be changed by any written document or by conduct unless such a change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that I will need to be formally cleared through the NYS Central Child Abuse Registry, the NYS Office for Children and Family Services Criminal History Review Unit, as required by the NYS Social Services Law and any and all agencies as required by Federal and State regulations.

I am at least 18 years of age and I do possess a High School Diploma/GED.

Applicant's Signature: _____ Date: _____