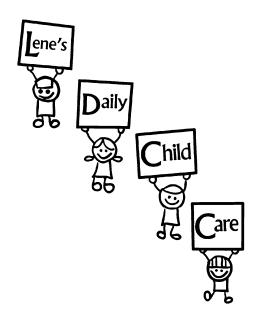
Application for Employment



Lene's Daily Child Care



Please Print Clearly

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed servicemember status, race, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Position Applied For	Na	me	
Telephone Number ()	Alternate or C	ellular Telepi	hone Number ()
Present Address			
	et, Apartment, or U	Init Number	
City	State	Zip	How long have you lived there/ Years/Months
Previous Address			
Stre	et, Apartment, or U	Init Number	
City	State	Zip	
Desired Salary/Hourly Rate			
If under the age of 18, can you produce the necessary	work certificate at t	he time of en	nployment? Yes 🗆 No 🗖
Type of employment desired? Full-time □	Part-time	(Specify Ho	ours)
Are you willing to work overtime? Yes □ No □	Date on wh	nich you can	start work if hired
Have you previously applied for employment with this	s Company? Yes 🗆	No □	
If Yes, when and where did you apply?			
Have you ever been employed by this Company? Yes separation from employment.	No □ If Yes	s, provide dat	es of employment, location, and reason for
			·

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS

- 1. All applicants: Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convictions that resulted in referral to a diversion program.
- 2. Arizona, Colorado, District of Columbia, Illinois, Kansas, Minnesota, Missouri, Montana, Nevada, Rhode Island, South Carolina, and Utah applicants: Do not respond to the second question regarding arrests.
- 3. California applicants: Do not include misdemeanor marijuana-related convictions that are more than two (2) years old or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed.
- 4. Connecticut applicants: You are not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased. Criminal records subject to erasure are records pertaining to a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolled (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been erased is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath.
- 5. District of Columbia and Washington applicants: Limit any response to the past ten (10) years.
- 6. Hawaii applicants: Do not answer the following two questions.
- 7. Indiana applicants: Regarding arrests limit your response to pending charges for felonies and class A misdemeanors that are less than one (1) year old.

- Massachusetts applicants: Limit any response regarding misdemeanor convictions to the last five (5) years and to those which were not a first offense for drunkenness, simple assault, speeding, a minor traffic violation or disturbing the peace. Applicants with a sealed record on file with the Massachusetts Commissioner of Probation may answer "No Record" with respect to: 1) all inquiries relating to prior convictions or arrests; 2) misdemeanor convictions older than five (5) years; and 3) first time convictions for simple assault, drunkenness, speeding, minor traffic violations or disturbing the peace.
- Michigan applicants: Regarding arrests, limit your response to felony arrests awaiting conviction or dismissal.
- New Y ork applicants: All pending arrests or criminal accusations must be disclosed. You are not required to disclose arrests or criminal accusations that resulted in criminal actions or proceedings which were terminated in your favor. Do not disclose criminal actions or proceedings that were sealed or classified as youthful offender adjudications. An ex-offender who is denied employment may, upon written request, receive a statement of the reason(s) for denial within thirty (30) days of the applicant's request for such information

	regon applicants: Regarding arrests, limit any response to felony convictions only				
Have you ever plead gui Yes □ No □	lty or no contest to, or been convicted of	any criminal offens	se other than the	applicable exce	ptions listed above?
Have you ever been arres Yes □ No □	sted for any matters for which you current	ly are out on bail or	on your own rec	ognizance pendi	ing trial?
	ONLY: If you an swered Yes, to either re instructions so that individual circumsta			e provide the da	te(s) and explain in
nature of the crime, its s the applicant's age at the	arrests will not automatically disqualify seriousness, the substantial relation to th he time of the crime, the time elapsed s and recommendations, and the business	ne position's function since the crime, the	ons and qualific e applicant's en	ations, the num	ber of occurrences,
Have you ever initiated a	n act of violence in the workplace? Yes	s 🗆 No 🗅			
If Yes, please provide the disqualify you from empl	e date(s) and explain so that individual circoyment.)	cumstances can be c	considered. (A"	Yes" answer wi	ll not necessarily
	skills that you feel qualify you for the job software, equipment operation, special too			mple., computer	
Education	School Name and Location (Address, City, State)	Course of Study	Graduate?	# of Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					
Honors Received					
If applicable, list below a	any other names by which you have been k xample, change of name, use of an assume			low us to confirm	n your work and

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for <u>all</u> periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

Name		Adduses			Tuna	of Ducines	
			Address Type of Business				
Telephone ()		Dates Employed F	rom/	/	To	/	/
Job Title		Duties					
Supervisor's Name		May we contac	t? ☐ Yes ☐ No I	f No, why	not?		
Wages Start	Final	Reason for Leaving					
What will this employer say	y was the reason yo	our employment terminated?					
How much notice did you g	give when resignin	g? If none, explain.					
Employer							
Name		Address			Туре	of Busines	s
Telephone ()		Dates Employed F	rom/	/	To		/
Job Title		Duties					
Job Title Supervisor's Name							
Supervisor's Name Wages Start What will this employer say	Finaly was the reason yo	May we contact? Reason for Leaving our employment terminated?	Yes □ No If No,	why not? _			
Supervisor's Name Wages Start What will this employer say	Finaly was the reason yo	May we contact? Reason for Leaving	Yes □ No If No,	why not? _			
Supervisor's Name Wages Start What will this employer say How much notice did you g	Finaly was the reason yo	May we contact? Reason for Leaving our employment terminated? g? If none, explain	Yes □ No If No,	why not? _			
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer	Finaly was the reason you	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address	Yes □ No If No,	why not? _	Туре	of Busines	s
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer Name Telephone ()	Final y was the reason you give when resigning	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F	Yes □ No If No,	why not? _	<i>Type</i> To	of Busines	s /
Supervisor's Name Wages Start What will this employer say How much notice did you g	Final y was the reason you give when resigning	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F	Yes No If No,	why not? _	<i>Type</i> To	of Busines	s /
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer Name Telephone () Job Title Supervisor's Name	Final y was the reason you	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F	rom/_	why not? _	<i>Type</i> To not?	of Busines	s /
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer Name Telephone () Job Title Supervisor's Name Wages Start	Final y was the reason you give when resigning Final	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F Duties May we contact Reason for Leaving	Yes □ No If No, Yes □ No If No, Yes □ No If No, Yes □ No I	why not?/	<i>Type</i> To not?	of Busines	s /
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer Name Telephone () Job Title Supervisor's Name Wages Start What will this employer say	Final	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F Duties May we contact	Yes □ No If No, Yes □ No If No, Yes □ Yes □ No I	why not?/	TypeTo not?	of Busines	s /
Supervisor's Name Wages Start What will this employer say How much notice did you g Employer Name Telephone () Job Title Supervisor's Name Wages Start What will this employer say How much notice did you g	Final	May we contact? Reason for Leaving our employment terminated? g? If none, explain Address Dates Employed F Duties May we contact Reason for Leaving our employment terminated?	rom/_	why not?/	TypeTo not?	of Busines	s /

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	NUMBER OF YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT -WILL EMPLOYER AS A LLOWED BY A PPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY RE ASON, WI THOR WI THOUT CAUSE OR NO TICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ME ORANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN A GREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I au thorize and co nsent to, w ithout r eservation, any p arty or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS A PPLICATION WILL BECONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

UNDER MASSACHUSETTS LAW, IT IS UNLAWFUL FOR A N E MPLOYER TO R EQUIRE OR TO A DMINISTER A L IE DE TECTOR, POLYGRAPH OR SIMILAR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT.

Applicant Signature ______ Date _____/____/____

FEDERAL AND/OR STATE LAW MAY PROHIBIT THE USE OF LIE DETECTOR, POLYGRAPH OR SIMILAR TEST AS WELL.

THIS APPLICATION MAY NOT BE APPLICABLE FOR ALL INDUSTRIES.

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