

Lambsgate Children's Center
6950 Carlisle Pike
New Kingstown, PA 17072
717-591-4283
Brenda Sanchez, Director
Email: brenda.lambsgate@gmail.com

Application for Employment

Please print clearly using black or blue ink. Answer all questions, sign and date the form.

PERSONAL INFORMATION:

First Name: _____

Middle Name: _____

Last Name: _____

Street
Address: _____

City, State,
Zip Code: _____

Phone
Number: _____

Are you eligible to work in the United States? ___ Yes ___ No

If you are under age 18, do you have an employment/age certicates? ___ Yes ___ No

Have you ever been convicted of or pleaded no contest to a felony within the last five years? ___ Yes ___ No

If yes, please explain: _____

POSITION/AVAILABILITY

Position applied for: _____

Days Available

Hours Available

Monday ___ from _____ to _____

Tuesday ___ from _____ to _____

Wednesday ___ from _____ to _____

Thursday ___ from _____ to _____

Friday ___ from _____ to _____

What date are you available to start work? _____

EDUCATION

Name and address of school, degree/diploma, and graduation date:

Skills and qualifications: Licenses, skill, training, and awards:

EMPLOYMENT HISTORY

Present or last position: _____

Name of Employer: _____

Address: _____

Name of Supervisor: _____

Supervisor
Phone: _____

Supervisor
Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary: _____

Reason for leaving: _____

May we contact your present employer? ___ Yes ___ No

Previous Position

Name of Employer: _____

Address: _____

Name of Supervisor: _____

Supervisor
Phone: _____

Supervisor
Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary: _____

Reason for leaving: _____

REFERENCES

Name/Title: _____

Address: _____

Phone: _____

Name/Title: _____

Address: _____

Phone: _____

“I certify that the information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future that I am hired. I authorize the verification of any or all information listed above.”

Signature: _____

Date: _____