



## Employment Application

An Equal Opportunity Employer

### Application Information

Position Applied For: \_\_\_\_\_

Date Available: \_\_\_\_\_

Legal Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Are you 18 years of age or older?  Yes  No

Are you legally authorized to work in the United States?  Yes  No

Have you ever been convicted of a felony or misdemeanor (excluding minor traffic violations)?  Yes  No

If yes, please explain.

\_\_\_\_\_

Have you ever been the subject of a child abuse or neglect investigation?  Yes  No

If yes, please explain.

\_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your current employer?  Yes  No

**Education**

High School Name: \_\_\_\_\_

Location: \_\_\_\_\_

Did you graduate?  Yes  No

College/University Name: \_\_\_\_\_

Location: \_\_\_\_\_

Years Completed: \_\_\_\_\_

Degree/Major: \_\_\_\_\_

Did you graduate?  Yes  No**Other Education or Training (Vocational, Technical, Certifications)**

Institution: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Certificates/Licenses Obtained: \_\_\_\_\_

**Employment History**

Please list your previous three employers, starting with the most recent.

**Employer 1**\_\_\_\_\_  
Company Name\_\_\_\_\_  
Phone\_\_\_\_\_  
Address\_\_\_\_\_  
Job Title\_\_\_\_\_  
Supervisor Name\_\_\_\_\_  
Dates Employed\_\_\_\_\_  
Duties\_\_\_\_\_  
Reason For Leaving**Employer 2**\_\_\_\_\_  
Company Name\_\_\_\_\_  
Phone\_\_\_\_\_  
Address\_\_\_\_\_  
Job Title\_\_\_\_\_  
Supervisor Name\_\_\_\_\_  
Dates Employed\_\_\_\_\_  
Duties\_\_\_\_\_  
Reason For Leaving

**Employer 3**

Company Name	Phone	Address
Job Title	Supervisor Name	Dates Employed
Duties	Reason For Leaving	

**Professional References**

Please provide three professional references (not relatives).

**Reference 1**

Name	Relationship	Company
Phone	Email	

**Reference 2**

Name	Relationship	Company
Phone	Email	

**Reference 3**

Name	Relationship	Company
Phone	Email	

**Skills and Qualifications**

Do you have current CPR certification?  Yes  No  
If yes, what is the expiration date? \_\_\_\_\_

Do you have current First Aid certification?  Yes  No  
If yes, what is the expiration date? \_\_\_\_\_

Do you have food handler certification?  Yes  No  
If yes, what is the expiration date? \_\_\_\_\_

Languages spoken fluently: \_\_\_\_\_

Special skills or qualifications relevant to child care:

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Experience with specific age groups :

- Infants (0-12 months)     Toddlers (1-2 years)  
 Preschool (3-5 years)     School-age (6+ years)

Are you able to lift and carry children weighing up to 40 pounds?  Yes  No

Do you have any physical limitations that would prevent you from performing child care duties?  Yes  No

**Availability**

What days are you available to work?

- Monday  Tuesday  Wednesday  Thursday  Friday  Weekends

Are you seeking?

- Full Time  Part Time

What hours are you available to work?

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Desired Hourly Rate: \_\_\_\_\_

## Background Check Authorization and Disclosure

I understand and acknowledge that:

Texas Health and Human Services Commission (HHSC) requires a criminal background check for all employees and volunteers at licensed child care facilities, including: FBI fingerprint-based national criminal history check, Texas Department of Public Safety criminal history check, Central Registry check for child abuse and neglect, and Sex offender registry check. Disqualifying offenses under Texas law include, but are not limited to: Crimes against children, Violent crimes, Sexual offenses, Drug-related offenses (within specified timeframes), and Other offenses listed in Texas Human Resources Code § 42.056.

I will be required to pay for the fingerprinting fee (approximately \$50) if offered employment. I authorize Mimi's Creative Kids Learning Center to conduct background checks including but not limited to: Criminal history, Employment verification, Education verification, Professional reference checks, Motor vehicle records (if applicable to position), and Child abuse and neglect registry checks. I understand that I must provide proof of a negative TB test result within the timeframe required by Texas Administrative Code before beginning employment. I understand that I may be required to submit to a health assessment or physical examination as required by HHSC regulations.

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Applicant Signature

Applicant Printed Name

Date

## Applicant Certification and Signature

I certify that all information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that any false information or omission may disqualify me from further consideration for employment or result in dismissal if discovered at a later date. I release all parties from any liability for any damage that may result from furnishing information to Mimi's Creative Kids Learning Center. I understand that this application is not a contract of employment and that completion of this application does not guarantee employment. If hired, I agree to comply with all policies, rules, and regulations of Mimi's Creative Kids Learning Center and the Texas Health and Human Services Commission child care licensing standards.

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Applicant Signature

Applicant Printed Name

Date