

Happy Day Learning Center

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Please Print

Position(s) applied for: _____ Date: _____

Full Name: _____

Address: _____

Phone #: _____ Cell Phone #: _____

Social Security #: _____

Have you filed an application with us previously? yes no If yes, date: _____

Have you ever been employed with us? yes no If yes, date: _____

Are you currently employed? yes no

May we contact your present employer? yes no

On what date would you be available for work? _____ Hours? _____

Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify you) yes no If yes, please explain: _____

PERSONAL INFORMATION

Present Church Membership: _____

Religious Affiliation: _____

In what congregational activities have you been involved, and how? _____

Please share your personal attitude towards

Alcoholic Beverages: _____

Tobacco: _____

Movies: _____

Narcotics: _____

How are you maintaining a growth in your Christian Life? _____

Explain your relationship to the Lord Jesus Christ: _____

Explain your philosophy of education: _____

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include any job-related military service assignments, and volunteer activities. You may exclude organizations which indicate race, color, gender, national origin, handicap, or other protected status.

1. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for leaving: _____

Dates Employed: From: _____ To: _____ Work Performed: _____

Starting Salary: _____/Hour Final Salary: _____/Hour

2. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for leaving: _____

Dates Employed: From: _____ To: _____ Work Performed: _____

Starting Salary: _____/Hour Final Salary: _____/Hour

3. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for leaving: _____

Dates Employed: From: _____ To: _____ Work Performed: _____

Starting Salary: _____/Hour Final Salary: _____/Hour

EDUCATION

Elementary School High School College/University Graduate

Name/ Location _____

Years Completed _____ 9__10__11__12__ 1__2__3__4__ 1__2__3__4__

Diploma / Degree: _____

Other Certificates: _____

Other Professional Certificates: _____

Work completed via correspondence: _____

Describe any specialized training, apprenticeship, skills and extracurricular activities:

State any additional information you feel may be helpful to us in considering your application:

List professional, trade, business or civic activities and offices held. (You may exclude membership which would reveal sex, race, national origin, age, ancestry, handicap or other protected status.)

Do you have a current First Aid Card? _____ If yes, date of expiration _____

If no, would you be willing to take a First Aid Course? ____yes ____no

REFERENCES

Give the names of three references who are not related to you and are not previous employers.

<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

These references are confidential and I waive my right to review them. I acknowledge that all above statements are true.

Signature

Date