

LITTLE EGGS EMPLOYMENT APPLICATION



Little Eggs Child Care Center is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis, including race, creed, color, age, sex, religion, or national origin.

Name _____ Date _____

Last First Middle

Present Address _____

Number/Street City State Zip Code

How long have you lived at this address? _____ Home Phone _____ Cell Phone _____

Email Address _____

How did you learn of this opening? _____

Position applied for: _____

Do you desire work _____ Full-time or _____ Part-time Comments: _____

If hired, when will you be available for work? _____

Do you have a reliable method of transportation to get to work? _____

Are you over 18 years of age? _____ Yes _____ No

Have you been convicted of a crime in the past 10 years, excluding misdemeanors and traffic violations? (Y/N) _____

If so, explain _____

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

EXPERIENCE WITH GROUPS OF CHILDREN: (Such as Scouts, Sunday School, etc)

Date _____ Experience _____

Date _____ Experience _____

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EDUCATION	Name and Location of School	# of Years Attended	Did You Graduate? Degree/Course of Studies
SCHOOL			
HIGH SCHOOL	_____	_____	
COLLEGE	_____	_____	
GRADUATE SCHOOL	_____	_____	
TRADE, BUSINESS, OTHER SCHOOL	_____	_____	

Subjects of Special Study or Research Work: _____

Certificates	Date Acquired	Expiration Date
	_____	_____
	_____	_____
	_____	_____
	_____	_____

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EMPLOYMENT HISTORY

Starting with your present or most recent employer, please list your last 3 jobs. Do not omit any work experience.

DATES OF EMPLOYMENT	EMPLOYER	DESCRIPTION OF DUTIES
From _____ To _____	Company _____	<hr/> <hr/> <hr/> <hr/> <hr/>
Position _____	Address _____	
Phone _____	City/State/Zip _____	
Salary _____	Supervisor's Name _____	
Reason for leaving _____		
From _____ To _____	Company _____	<hr/> <hr/> <hr/> <hr/> <hr/>
Position _____	Address _____	
Phone _____	City/State/Zip _____	
Salary _____	Supervisor's Name _____	
Reason for leaving _____		
From _____ To _____	Company _____	<hr/> <hr/> <hr/> <hr/> <hr/>
Position _____	Address _____	
Phone _____	City/State/Zip _____	
Salary _____	Supervisor's Name _____	
Reason for leaving _____		

May we contact the employer's listed above? Yes No If not, indicate below which one(s) you do not wish us to contact. _____

Are you employed now? Yes No If currently employed, why are you interested in changing employment: _____

PERSONAL REFERENCES (List three persons, excluding former employers or relatives.)

NAME	ADDRESS	YRS. AQUAINTED	TELEPHONE

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for refusal of employment or dismissal.

Applicant Signature _____ Date _____