

**EMPLOYMENT
APPLICATION**



DATE

POSITION DESIRED/FT OR PT

DESIRED WAGES

DATE AVAILABLE /START DATE

NAME (First) (Middle) (Last) MAIDEN NAME (if applicable)

HOME STREET ADDRESS CITY STATE ZIP CELL PHONE

BIRTHDATE BIRTH STATE SOCIAL SECURITY NUMBER EMAIL ADDRESS

Have you lived in Missouri for the last 5 years? _____ YES _____ NO Where _____

If you are under age 18, can you submit a work permit if hired? _____ YES _____ NO _____ I am at least 18

Are you a US citizen? _____ YES _____ NO

If you are not a US citizen, do you have a VISA to work in the US? _____ YES _____ NO

If yes, what kind of VISA classification? _____ Visa Registration No: _____

Expiration Date: _____

Has bond or security clearance ever been denied and/or canceled? _____ YES _____ NO

If yes, please explain: _____

Able to Pass a Drug Test? _____ YES _____ NO

Agree to random drug tests? _____ YES _____ NO

(Intoxication of any kind, i.e., illegal drugs, alcohol, cannabis, is prohibited and will result in termination of employment)

EDUCATION (Attach documentation of qualifying education)

High School YEAR ATTENDED DIPLOMA/CERT/DEGREE

College

Other

EXPERIENCE WITH CHILDREN (Indicate ages of children, your duties, and dates you worked or volunteered.)

(Attach any documentation of experience working with children.)

Do you have any children that need child care while you are at work? _____ YES _____ NO

(Please note: While we do offer child care benefits for our staff, enrollment is not guaranteed. It depends on our available space and the number of staff children currently enrolled.)

If yes, please list their name and ages: _____

LIST YOUR TEN-YEAR EMPLOYMENT HISTORY. BEGIN WITH YOUR MOST CURRENT OR LAST EMPLOYER. IF YOU HAVE BEEN UNEMPLOYED DURING ANY TIME WITHIN THE PAST TEN YEARS, LIST HOW YOU SPENT YOUR TIME. EXAMPLE: STUDENT, HOUSEWIFE, UNEMPLOYED, ETC.

MONTH/YEAR	NAME, PHONE, & ADDRESS OF EMPLOYER	POSITION AND DUTIES	REASON FOR LEAVING
<u>FROM:</u> <u>TO:</u>			
<u>FROM:</u> <u>TO:</u>			
<u>FROM:</u> <u>TO:</u>			
<u>FROM:</u> <u>TO:</u>			
<u>FROM:</u> <u>TO:</u>			

May we contact previous employers? YES NO

Do you have a criminal record? YES NO

If yes, explain _____

Have you ever been shown by credible evidence, e.g., a court order or jury, a department investigation or other reliable evidence to have abused, neglected or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct? YES NO

If yes, explain: _____

Can you perform the essential function of the position for which you are applying? YES NO

If no, please explain: _____

Do you have a valid driver's license? YES NO If yes, give the license number and class: _____

Have you had CPR and first aid training within the past two years? YES NO

If yes, give expiration date: _____

Have you attended/completed any child care training courses? YES NO

If yes, please list: _____

Our state licensing department requires annual child care training, are you willing to participate? YES NO



I hereby certify that all the information provided in this employment application is true and complete. I understand that false information or the omission of information may disqualify my candidacy and may be grounds for termination. I further understand that I am applying to a Drug Free Workplace and may be required to submit to testing for the presence of drugs as a condition for employment.

Signature: _____ Date: _____