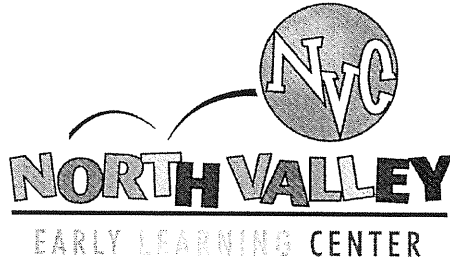


For Office Use Only

Date of Application \_\_\_\_\_

Position \_\_\_\_\_

Date Hired \_\_\_\_\_



## Application for Employment

Full Name: \_\_\_\_\_

(Last)

(First)

(MI)

(Maiden)

Home Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

Driver's License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Position Desired \_\_\_\_\_

### Education Background:

Education	School/ Institution	Dates Attended	Diploma/Degree/ Certificate
High School			
College			
Graduate			
Other			

## Employment History:

Employer:		Employer's Address
Telephone:		
Dates worked	Position/Job Title	Job Responsibilities
Immediate Supervisor	Reason for leaving	May we contact for references? ( )Yes ( )No

Employer:		Employer's Address
Telephone:		
Dates worked	Position/Job Title	Job Responsibilities
Immediate Supervisor	Reason for leaving	May we contact for references? ( )Yes ( )No

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Telephone:		
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Employer:		Employer's Address
Telephone:		
Dates worked	Position/Job Title	Job Responsibilities
Immediate Supervisor	Reason for leaving	May we contact for references? ( )Yes ( )No

**Skills and Qualifications:** Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work the ECL

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**References:** List at least three persons who are not related to you to be contacted as references.

Name	Telephone	Relationship and Years Known
	( )	
	( )	
	( )	

### Conviction Report

Have you ever been convicted of a violation of law other than a minor traffic violation?

( ) yes ( ) no

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

Are any criminal charges or proceedings pending against you? ( ) yes ( ) no

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? ( ) yes ( ) no

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

By signing this form, I am affirming that the above information and statements I have made are true and factual to the best of my knowledge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Personal Information

Church Affiliation \_\_\_\_\_

Telephone \_\_\_\_\_ Pastor's Name \_\_\_\_\_

May we contact for reference ( ) yes ( ) no

Do you have children who would be enrolled in our program? ( ) yes ( ) no

Names and Ages \_\_\_\_\_

\_\_\_\_\_

Volunteer Experience (indicate position when appropriate, include church work)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why would you like to be a teacher at the Early Learning Center?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What age do you prefer to work with? Indicate first and second choice

\_\_\_\_\_

\_\_\_\_\_

## Personal Lifestyle and Ethics

The North Valley Early Learning Center will be expecting high standards from both your job performance and your lifestyle away from the ELC. It is most important that you agree with, believe in and live by our Philosophy and Statement of Faith. As an employee at will with North Valley Early Learning Center you are representing this ministry and more importantly, you are representing Jesus Christ.

We reserve the right to dismiss any person who does not live by this Philosophy and Statement of Faith.

If hired as an employee at will by North Valley Early Learning Center, I understand and agree to the Personal Lifestyle and Ethics Policy. I understand that my failure to do so will result in the immediate termination from North Valley Early Learning Center.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

