

Discovery Zone Kids

DATE _____

APPLICATION FORM FOR CHILD FACILITY PERSONNEL

POSITION DESIRED _____

DATE AVAILABLE _____

NAME (First) _____ (Middle) _____ (Last) _____ SPOUSE'S NAME _____

HOME ADDRESS _____ HOME PHONE _____

BIRTHDATE _____ SOCIAL SECURITY NUMBER _____

If you are under age 18, can you submit a work permit if hired? _____

If you are not a US citizen, do you have a VISA to work in the US? _____

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: _____

EDUCATION (Attach documentation of qualifying education)

	PLACE	DATES	DIPLOMA CERT. OR DEGREE
Elementary	_____	_____	_____
Secondary	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

Experience with groups of children (indication ages of children, your duties, dates of time you worked in this position, reason for leaving)

Attach documentation of experience working with children.

HAVE YOU ATTENDED/COMPLETED ANY CHILD CARE TRAINING COURSES? _____ YES _____ NO IF YES LIST:

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, e.g., STUDENT, HOUSEWIFE, UNEMPLOYED, ETC.

MONTH/YEAR	NAME AND ADDRESS OF EMPLOYER	POSITION
FROM _____ TO _____		
FROM _____ TO _____		
FROM _____ TO _____		

May we contact previous employers? _____ Your last pay per hour? _____ Desired pay per hour? _____

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: _____

Under the Americans with Disabilities Act of 1991, this program is required to reasonably accommodate individuals with a disability. The reasonable accommodation requirement applies to the application process, any pre-employment testing, interviews and actual employment, but only if the program supervisor is made aware that an accommodation is required. If you are disabled and require accommodation, you may request it at any time during the interview process. You are obligated to inform the program director of your needs if it will impact your ability to perform the job for which you are applying.

Having read the job description for the position for which you are applying, are you in all respects, able to adequately perform the duties as described? Yes No

If no, please explain: _____

Do you have a valid driver's license? Yes No

If yes, give the license number and class of license: _____

Have you had CPR training within the past two years? Yes No

If yes, give expiration date: _____

Have you had first aid training within the past three years? Yes No

If yes, give expiration date: _____

All childcare workers are required to attend annual child care training, are you will to participate? Yes No

If no, please explain: _____

I certify that all information on this application is correct. I have not given any false statement concerning my qualification requirements.

Signature _____ Date _____

Employment Record

(To fill out only if page 2 doesn't have enough space for ten years of work history)

Name: _____ Social Security Number: _____

Address: _____

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