



APPLICATION FOR EMPLOYMENT						
Full Name:				Date of Application:		
Current Address:				Date Available for Work:		
Email:				Phone:		
How did you hear about us?						
<input type="checkbox"/> Friend/ Relative		<input type="checkbox"/> Current Employee		<input type="checkbox"/> Internet		<input type="checkbox"/> Walk-In <input type="checkbox"/> Other:
Have you applied with us before?				<input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, when?
Employment Desired:		<input type="checkbox"/> Full Time Only <input type="checkbox"/> Part Time Only		<input type="checkbox"/> Full or Part Time		<input type="checkbox"/> On-Call/ Seasonal
Position Desired:				Rate Desired:		
Hours Available:						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Educational Experience						
School		Course of Study		Years Completed	Diploma/ Degree	
High School						
College						
Graduate School						
Other(Specify)						
Do you have a Child Development Associate Certification?			<input type="checkbox"/> Yes <input type="checkbox"/> No		Date Earned:	
List any other relevant skills, vocational, or technical training:						

Employment History

Have you worked for us previously? If yes, when?

Employer	Dates Employed		Duties
Address	From	To	
Phone	May We Contact?		
Supervisor	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reason for Leaving

Employer	Dates Employed		Duties
Address	From	To	
Phone	May We Contact?		
Supervisor	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reason for Leaving

Employer	Dates Employed		Duties
Address	From	To	
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Employer	Dates Employed		Duties
Address	From	To	
Phone	May We Contact?		
Supervisor	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reason for Leaving

Describe any additional experiences working with young children or in a religious setting:

Additional Information		
What is your religious affiliation?		
Name of church you are currently a member of:		
Are you at least 18 years of age?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to satisfy the physical requirements of the job for which you are applying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If hired, will you be able to provide proof of legal authorization to work in this country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Background Information		
Have you ever been convicted of or are you the subject of pending charges of any crime <u>within</u> the Commonwealth of Virginia?		
<input type="checkbox"/> Yes (convicted in VA)	<input type="checkbox"/> Yes (pending in VA)	<input type="checkbox"/> No
Have you ever been convicted of or are you the subject of pending charges of any crime <u>outside</u> the Commonwealth of Virginia?		
<input type="checkbox"/> Yes (convicted outside VA)	<input type="checkbox"/> Yes (pending outside VA)	<input type="checkbox"/> No
Have you ever been the subject of a founded complaint of child abuse or neglect <u>within</u> the Commonwealth of Virginia?		
<input type="checkbox"/> Yes (in VA)	No (in VA)	
Have you ever been the subject of a founded complaint of child abuse or neglect <u>outside</u> the Commonwealth of Virginia?		
<input type="checkbox"/> Yes (outside VA)	No (outside VA)	
If you answered Yes to any of the above question, please explain:		
Professional References		
Please list at least two people not related to you, whom you have known for at least one year.		
Name	Company/Relationship	Phone
Name	Company/Relationship	Phone
Name	Company/Relationship	Phone
Certification of Information		
I hereby certify that the above statements are true and give my permission for any verification. I understand that falsification, misrepresentation or omission of facts will be sufficient cause for refusal of employment or cause for dismissal.		
Signature of Applicant:	Date:	