## Employment Application

# First United Daycare & School Age Program First United Methodist Church

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | Date: | | | |  | | | |
| Last | | | | | | | | | | | | | | | | First | | | | | | | | | | | | | | | M.I. | | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Street Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | | | | | |
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| City | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | State | | | | | | | ZIP Code | | | | |
| Phone: | (     ) | | | | | | | | | | | | | | | | | | E-mail Address: | | | | | | |  | | | | | | | | | | | | | | | | |
| Date Available: | | | | |  | | | | | | | Social Security No.: | | | | | | |  | | | | | | | | | | | Desired Salary: | | | | | | | $ | | | | | |
| Position Applied for: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | YES | | | | NO | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | | | YES | NO |
| Have you ever worked for this company? | | | | | | | | | | | | | | YES | | | | NO | | If yes, when? | | | | | | |  | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | | YES | | | | NO | |  | | | | | | | | | | | | | | | | | | | | | | |
| If yes, explain: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School: | | | |  | | | | | | | | | | | | | Address: | | | | |  | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | To: | | |  | | | Did you graduate? | | | | | | | | | YES | | NO | | | | | Degree: | | | | |  | | | | | | | | |
| College: | | |  | | | | | | | | | | | | | | Address: | | | | |  | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | To: | | |  | | | Did you graduate? | | | | | | | | | YES | | NO | | | | | Degree: | | | | |  | | | | | | | | |
| Other: |  | | | | | | | | | | | | | | | | Address: | | | | |  | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | To: | | |  | | | Did you graduate? | | | | | | | | | YES | | NO | | | | | Degree: | | | | |  | | | | | | | | |
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| References | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three **professional** references. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | |  | | | | | | | | | | | | | | | | | | Relationship: | | | | |  | | | | | | | | | | | | | | | | |
| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Full Name: | | |  | | | | | | | | | | | | | | | | | | Relationship: | | | | |  | | | | | | | | | | | | | | | | |
| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | (     ) | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Full Name: | | |  | | | | | | | | | | | | | | | | | | Relationship: | | | | |  | | | | | | | | | | | | | | | | |
| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | (     ) | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | |  | | | | | | | | | |
| Job Title: | | |  | | | | | | | | | | | | Starting Salary: | | | | | | | | $ | | | | | | | | | Ending Salary: | | | | | | | | $ | | |
| Responsibilities: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | To: | |  | | | Reason for Leaving: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | | |  | | | | | | | | | | | | |
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| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | (     ) | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | |  | | | | | | | | | |
| Job Title: | | |  | | | | | | | | | | | | Starting Salary: | | | | | | | | $ | | | | | | | | | Ending Salary: | | | | | | | | $ | | |
| Responsibilities: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | To: | |  | | | Reason for Leaving: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | | |  | | | | | | | | | | | | |
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| Company: | | |  | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | (     ) | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | |  | | | | | | | | | |
| Job Title: | | |  | | | | | | | | | | | | Starting Salary: | | | | | | | | $ | | | | | | | | | Ending Salary: | | | | | | | | $ | | |
| Responsibilities: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | To: | |  | | | Reason for Leaving: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | | |  | | | | | | | | | | | | |
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| Disclaimer and Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I understand and am in agreement with the daycare’s policy of hiring and promoting personnel on the basis of experience, qualifications, and capability—without regard to age, sex, religion, veteran status, marital status, handicap, color, race, national origin, or sexual preference. By virtue of my signature below, I authorize the daycare to obtain any relevant information concerning me from former employers or supervisors, references, associates, school officials, and others; and, it is understood that I release all concerned from any liability in connection therewith. I further certify that ALL information given on the application for employment is absolutely correct to the best of my knowledge. I understand that any willful omission, misrepresentation, or falsification will constitute valid grounds for immediate termination of employment. We will be checking your references. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Department of Public Welfare requires all daycare center to obtain a PA Child Abuse History Clearance, PA State Police Criminal Record Clearance, FBI fingerprinting clearance, and a current physical with TB from all employees. If you have had these clearances done within the past year we will need to see the original copies. If not we will provide the necessary forms. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date: | | |  | | | | | | |