

Employment Application

| Full Name: | | Home Ph: | Cell | Ph: | | |
|---|-------------------|----------------------------|----------------------|------------------------------|--|--|
| Current Address: | | | DO | B: | | |
| Soc. Sec. #: | | Driver's Lic#: | Ema | ail: | | |
| | | | | | | |
| Thank you for choosing Gateway Learning Center (GLC) in your career path. We are dedicated to hiring professionals who are energetic, motivated, and possess integrity. GLC is an Equal Opportunity Employer. Applicants must show they understand and are able to meet the following requirements for employment by <i>initialing each item below</i> . | | | | | | |
| High School Graduate or G.E.D recipient Negative TB Test and will provide current medical documentation United States Citizen, or legally authorized to work in the United States Will provide Social Security Card or Birth Certificate Will submit to drug and alcohol testing as required Will complete an FBI criminal background check Will complete a Child Maltreatment Central Registry check Physically able to safely supervise young children and perform necessary job functions Will maintain professional appearance and conduct at all times | | | | | | |
| | | GENERAL INFORMA | ΓΙΟΝ | | | |
| Employment Desired: | Full-time only | Part time only | Full or Part time | On Call | | |
| Position Desired: | | | | | | |
| Hourly Rate Desired: | | | | | | |
| Hours available: Mon: _ | Tues: | Wed: | Thurs: | Fri: | | |
| Are you seeking temporary or permanent work? | | | | | | |
| 3 PERSONAL REFERENCES (do not list family or previous employers) | | | | | | |
| | 3 I ERSOTTIE REIT | EREFVEES (do not list fair | my of previous emple | y 013) | | |
| Name | Address | Phone Number | Relatio | nship (ie. Coworker, friend) | | |
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EDUCATIONAL EXPERIENCE

| High School attended/address/year graduated | | | | | | | |
|--|---------------------|--------------------------------|---------------------------------|--|-----------------------|--|--|
| College | attended/Deg | gree or number years comp | leted/Major | | | | |
| Child D | evelopment A | Associate Certification | | | | | |
| List courses completed or relevant childcare training (CPR, First Aid, Child Development, etc.): | | | | | | | |
| | | | | | | | |
| List oth | er skills, voca | ntional, and technical traini | ng | | | | |
| | | | | | | | |
| | | | | | | | |
| | | EMPLOYM | IENT HISTORY (begin wi | th most recent) | | | |
| Begin/End Date | Begin/End Salary | Employer/Address | Supervisor's Name & Ph: | Your title and duties | Reason for leaving | | |
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| | | OFFENSES Criminal 1 | an alramoum d'ala alra vvill ha | aandustad on all annlisants | | | |
| Hava van a | rran mlad avrilts | | | conducted on all applicants. e? If yes, explain: | | | |
| nave you e | | | | | | | |
| | | | | | | | |
| rias a repor | t of child mar | treatment ever been made a | igamst you? II yes, explan | 1: | | | |
| Hag a gazzet | arram damia dum | nomental avatadial amvisita | tion mights on a magnit of ma | glect or abuse of a child? If ye | o ovaloja. | | |
| rias a court | ever demed p | parental, custodial, or visita | tion rights as a result of he | glect of abuse of a child? If ye | ss, explain: | | |
| W/l-:11 | | J 1 1 | h dhh | | -11.1 - Can a -1.11.4 | | |
| _ | - | | - | ciplinary action or been respon | | | |
| facility rece | an adm | inistrative or disciplinary a | ction? If yes, explain: | | | | |
| | | | | | | | |
| | | | | | | | |
| | | PLEASE AN | SWER THE FOLLOWING | G QUESTIONS: | | | |

| 1. | What are your career goals and objectives? | | | | | |
|--|---|--|--|--|--|--|
| 2. | Why should GLC hire you? | | | | | |
| 3. | Define PROFESSIONAL CONDUCT. How does it | t apply to a child care program? | | | | |
| 4. | Define CUSTOMER SERVICE and how it relates to | o a child care program? | | | | |
| 5. | Describe your position on guidance as it relates to 3-y | -year-old children arguing over a toy. | | | | |
| | ize any additional information necessary to describe y | ely summarize a complete background. Use the space below to your full qualifications for the specific position for which you | | | | |
| I hereby certify that all information contained in this application is true and correct. I understand that any misrepresentation, falsification, or consequential omission of information may render this application void, or if employed may result in immediate termination. I further consent and agree to submit to any job related medical exams or drug tests that might be required and agree to provide any information that may be needed to facilitate such tests. I authorize the individuals and institutions named above to give information regarding my employment, character, and qualification, hereby releasing them from all liability for issuing such information. | | | | | | |
| Printed | name/Signature of Applicant | Date | | | | |
| Office Use Only: | | | | | | |
| Date Su | | Position: | | | | |
| | | | | | | |
| DILECTO | Proceed + or - Interview: | : Date Hired: | | | | |