



**3307 Jog Rd
Lake Worth, FL 33467**

**EMPLOYMENT APPLICATION
PLEASE PRINT**

NAME _____ **DATE** _____

ADDRESS _____ **PHONE** _____

CITY _____ **STATE** _____ **ZIP CODE** _____

EMAIL ADDRESS: _____

Are you over 19? _____ **If not, date of birth** _____

Who or what referred you to our school _____

Position Desired _____

Do you have experience with this age group? _____

Salary Desired _____

Days available for work _____ **Hours** _____

Are you currently employed? _____ **May we contact your present employer** _____

Have you applied to this company before? _____ **If so, when?** _____

Name &Address of High School	From-To	Graduated? Degree Attained
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Name &Address of College	From-To	Graduated? Degree Attained
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Name & Address of Graduate School From-To Graduated? Degree Attained

Do you have:

40 hr Child Care Certification _____ CDA Certification _____
1st Aid and CPR _____ CDL drivers license _____
Reliable transportation _____ Drivers license _____
Any other special training pertaining to childcare _____

Have you previously been screened by HRS _____ If so, when _____

PHYSICAL RECORD

How would you describe your general health?

Is there any present or past health problem that may affect your job performance?

PERSONAL RECORD

Are you a citizen? _____

What foreign language(s) do you speak _____

PREVIOUS EMPLOYMENT (Most recent first)

Name and Address

From _____ -to _____ Position _____

Salary _____

Supervisor _____ Tel # _____

Reason for leaving _____

Name and Address

From _____ -to _____ Position _____

Salary _____

Supervisor _____ Tel # _____

Reason for leaving _____

Name and address

From _____ **-to** _____ **Position** _____

Salary _____

Supervisor _____ **Tel #** _____

Reason for leaving _____

PLEASE ANSWER THE FOLLOWING QUESTIONS

Explain CONFIDENTIALITY as it relates to a childcare or school program.

How has your **education** or **life experience** prepared you to work with young children?

Use three words to describe yourself.

**** Have you ever been arrested No _____ Yes _____ Explain _____

I authorize the investigation of all statement contained in this application. I understand that misrepresentation or omissions of facts is cause for dismissal.

Signature _____

*****Incomplete or unsigned applications will not be considered for interview.**

For Office Use:

Date Interviewed: _____

Date Hired : _____

Start Date: _____