Young Horizons Child Development Centers

Employment Application

*Incomplete answers will disqualify your application.*

USE TAB KEY TO MOVE TO NEXT FIELD, SPACE BAR SELECTS A BOX

##### WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

# **Please Type or Print**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Position Applied for: | | | | | Date of Application | |
| **How Did You Learn About Us?**  On-line Ad       Walk-In  Flyer  Employee of Young Horizons       Employment Agency  School       Other: | | | | | | |
| Last Name | First Name | | | Middle Name | | |
| Street Address | | City | | | State | Zip |
| Home Telephone Number | Cell Phone Number | | Email address | | | |

Are you 18 or older? ***If not, proof of your eligibility to work is required***.  Yes  No

Have you ever filed an application with us before?  Yes  No

If yes, give date:

Have you ever been employed with us before?  Yes  No

If yes, give date:

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No  NA

Are you currently on “lay-off” status and subject to recall?  Yes  No

On what date would you be available for work?

Are you available to work:  Full Time  Part Time Substitute  Temporary

Are you able to lift 30 pounds?  Yes  No

Are you prevented from lawfully becoming employed in this country because

of Visa or Immigration Status?  Yes  No

***Proof of citizenship or immigration status will be required before employment start date.***

Have you been convicted of a felony?  Yes  No

Do not include information regarding any marijuana conviction that is more than two years old. (A conviction may be relevant if job-related, but does not necessarily bar you from employment.) ***A State Licensing fingerprint clearance will be required before start of employment. Some felony charges will prohibit you from working with children.***

Do you have any physical or other limitation that would **prevent** you from

performing the duties of the job for which you are applying? Yes  No

Remarks:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Education** | | | | |
|  | **School Name & Address** | **Years Completed** | **Course of Study** | **Honors Received** | |
| Elementary |  |  |  |  | |
| **Diploma / Degree** |
|  |
| Middle / Jr. High |  | **Years Completed** | **Course of Study** | **Honors Received** | |
|  |  |  | |
| **Diploma / Degree** |
|  |
| High School |  | **Years Completed** | **Course of Study** | **Honors Received** | |
|  |  |  | |
| **Diploma / Degree** |
|  |
| College or University |  | **Years Completed** | **Course of Study** | **Honors Received** | |
|  |  |  | |
| **Diploma / Degree** |
|  |
|  | **Describe any specialized training, skills and extra-curricular activities:** | | | | |
|  | **List professional, trade, business or civic activities and offices held.**  *(You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status):* | | | | |
|  | **Have you had any job-related training in the United States Military?** | | | Yes | No |
|  | If yes, please describe | | | | |
|  | **Do you speak/read/write any foreign languages?**  YES  NO If yes, language/s: | | | | |
|  | **Professional References:** Give names, telephone numbers and occupations of three references who are **not related** to you   1. Name:      Telephone Number:       Occupation: 2. Name:      Telephone Number:       Occupation: 3. Name:      Telephone Number:       Occupation: | | | | |

**Start with your present or last job. If you need additional space, continue on a separate sheet of paper. Failure to include any past job experiences will disqualify this application. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, handicap or other protected status. Complete all sections. Do not write “See attached resume.”**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Present/Most Recent Employer:**  Company Name:  Address: | | **Dates Employed** | | **Work Performed** |
| **From** | **To** |  |
|  |  |
| **Telephone Number (**       )       - | | **Hourly / Salary Rate** | |
| **Job Title:** | **Supervisor’s Name** | **Starting** | **Final** |
|  |  |
| **Reason for Leaving:** | | | | |
|  | | | | |
| **Past Employer:**  Company Name:  Address: | | **Dates Employed** | | **Work Performed** |
| **From** | **To** |  |
|  |  |
| **Telephone Number (**       )       - | | **Hourly / Salary Rate** | |
| **Job Title:** | **Supervisor’s Name** | **Starting** | **Final** |
|  |  |
| **Reason for Leaving:** | | | | |
|  | | | | |
| **Past Employer:**  Company Name:  Address: | | **Dates Employed** | | **Work Performed** |
| **From** | **To** |  |
|  |  |
| **Telephone Number (**       )       - | | **Hourly / Salary Rate** | |
| **Job Title:** | **Supervisor’s Name** | **Starting** | **Final** |
|  |  |
| **Reason for Leaving:** | | | | |
|  | | | | |
| **Past Employer:**  Company Name:     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Dates Employed** | | **Work Performed** |
| **From** | **To** |  |
|  |  |
| **Telephone Number (**       )       - | | **Hourly / Salary Rate** | |
| **Job Title:** | **Supervisor’s Name** | **Starting** | **Final** |
|  |  |
| **Reason for Leaving:** | | | | |
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***State any additional information you feel may be helpful to us in considering your application:***

|  |  |
| --- | --- |
| I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.  This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.  I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time or terminate his/her employment at any time and the Employer may discharge Employee at any time with or without cause. The Company may transfer, reassign, suspend or demote me at any time. It is further understood that this “at will” employment relationship may not be changed by any written document. I further understand that no one has the authority to enter into any agreement of employment for any specified period of time, or to make any agreement contrary to the foregoing other than in an express written agreement that is signed by me and the Executive Director.  In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer and that at will language does not protect the company against discrimination, whistleblowers act or retaliation. | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Applicant | \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |

**For Use By Personnel Department**

Arrange interview: Yes No Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Interviewer Notes:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Employed: Yes No Date of Employment:\_\_\_\_\_\_-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewer Name and Title Date

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewer Name and Title Date

Classroom demo scheduled on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ at \_\_\_\_\_\_:\_\_\_\_\_\_\_ am / pm (circle one)

Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Site Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_