Laurelwood Community Preschool



Employment Application

Please type or print. Fully complete all pages even when submitting a resume.

			Pers	onal Data			
Full Name:	Last	First			M.I.	Date:	
Home Address:	Street Address					Apartment/U	'nit #
Mailing Address:	City				State	ZIP Code	
	Street Address					Apartment/U	nit #
	City				State	ZIP Code	
Home Phone:		Cell Phone:			Email:		
Do you have any relatives or in-laws employed by this company?		YES	NO	If yes, explain:			
	r the age of 18 years? vill be required to provide auth	YES Orization to	NO	k and must be at least 10	6 years of	age.)	
Do you have a legal right to work in the United States of America?		YES	NO		Can you	YE provide proof?	
Have you be	een employed here previously	YES	NO	Have you e	ver applied	YEd here before?	
Have you ever been convicted of breaking a law other than a minor traffic violation?		YES	NO	If yes, give the date and	d explain fu	ully below:	
	ver had Department of Social SS) substantiation?	YES	NO	If yes, list country/state	; give the d	date and explain fu	ılly below:
(The offense	e(s) and how recently you wer	e convicte	d will	be evaluated in relation	to the job t	for which you are	applying.)

	Job Requi	rements				
Position Desired:						
The following conditions may be required at some point in a job assignment. If required, would you be willing to work:: YES NO YES NO						
Overtime work?	YES NO YES vertime work? \square Work schedule other than Monday through Friday? \square					
Check appropriate box for type of employment:	Regular	Part-Time □	Temporary	Summer	Cooperative Education	
When would you be available to begin work?						
Can you perform the essential functions of a child with Laurelwood?	d care position	on YES	NO			
If no, please explain:						
Em Please list employment history for	ployment			ost recent en	mplover	
Company:	the last terr	years, begin	ining with hir	Phone:	пріоует.	
Address:			5	Supervisor:		
Job Title:	Starting Sa	lon/: ¢		Ending Sala	rv.¢	
	Starting Sa	iaiy.•		Lituing Sala	ι y . Φ	
Responsibilities:						
From:		To:				
Reason for leaving:						
May we contact your supervisor for a reference?		YES	NO			
Company:				Phone:		
Address:			S	Supervisor:		
Job Title:	Starting Salary:\$ Ending Salary:\$			ry: \$		
Responsibilities:						
From:		To:				
Reason for leaving:						
May we contact your previous supervisor for a re	ference?	YES	NO			

Employi	пепі Ехреп	ence con	itiiiueu	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Sala	ary: \$		Ending Salary:\$
Responsibilities:				
From:		To:		
Reason for leaving:				
May we contact your previous supervisor for a re	eference?	YES	NO	
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Sala	ary:\$		Ending Salary:\$
Responsibilities:				
From:		To:		
Reason for leaving:				
May we contact your previous supervisor for a re	eference?	YES	NO	
Please explain any gaps in work history:				
Have you ever been discharged or asked to rejob?	esign from a	YES	NO	
If yes, please explain:				

Additional work/volunteer experience you would like to describe:
(You need not disclose volunteer activities that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, military status or any other protected status.)

Do you have any special skills that would enhance your ability to perform the position applied for? If yes, describe:

Education & Training							
High School: Did you graduate?	YES	NO	Addres Course of Study:		Diploma:		
College: Did you graduate?	YES	NO	Addres Course of Study:	SS:	Degree:		
College: Did you graduate?	YES	NO	Addres Course of Study:	ss:	Degree:		
Graduate & Professional: Did you graduate?	YES	NO	Addres	ss:	Degree:		
Educational, Vocational, etc.: Did you graduate?	YES	NO	Addres Course of Study:	ss:	Degree:		
Computer Skills: Child care training, education and workshops you have completed in the last three years:							
Foreign Language Skills:							
Language Spoken:				Proficiency Level (spoken): Proficiency Level (written):	Beginner	Intermediate Intermediate	
Language Spoken:				Proficiency Level (spoken): Proficiency Level (written):	Beginner	Intermediate Intermediate	Advanced Advanced

Professional License and/or Membership: (You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, military status or any other protected status.)

Refere	nces				
Please provide the names of two supervisors and two co-workers or direct reports.					
Name:	Relationship:				
Company:	Phone:				
E-mail:					
Name:	Relationship:				
Company:	Phone:				
E-mail:					
Name:	Relationship:				
Company:	Phone:				
E-mail:					
Name:	Relationship:				
Company:	Phone:				
E-mail:					
Disclaimer an	d Signature				
Laurelwood is an equal opportunity employer. Laurelwood does not discriminate in employment regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, military status or any other protected status.					
I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Laurelwood to hire me. If I am hired, I understand that either Laurelwood or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Laurelwood has the authority to make any assurance to the contrary. I further understand that hiring is contingent upon receipt of a satisfactory medical evaluation.					
In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration, and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I hereby release Laurelwood from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I also release any employer from any obligation to provide me with written notification of any information disclosed. I authorize investigations of all statements made in this application and understand that false information of documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or dismissal if I am employed, and (or) criminal action. I further understand that dismissal on unemployment shall be mandatory if fraudulent disclosures are given to meet position qualifications.					
By my signature indicated below, I certify that I have given application and affirm the contents of the above.	true, accurate, and complete information on this				
Signature:	Date:				

Essential Functions

To perform in a child care position with Laurelwood, the individual must be able to carry out all essential functions satisfactorily. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions of the job.

Child care staff must be able to perform the following physical activities:

- Observe, see, hear and respond to children's needs, emergencies and conflicts that may occur in the early childhood center or on the playground.
- Lift 35 pounds from the floor to waist height (ability to carry a 2- or 3-year-old child).
- Push, pull and/or lift child care equipment up to 35 pounds.
- Walk up and down stairs.
- Reach a child 20 to 30 feet away within 30 seconds without endangering the staff person's health.
- Crouch to a child's height, maintain eye contact at the child's level, sit on the floor, and ability to bend over to pick items up off of ground level.