



APPLICATION FOR EMPLOYMENT

Personal Information				Date:	
Name:	Last:	First:	Middle:		
Present Address:	Street:	City:	State:	Zip:	
Social Security No.:		Email address:			
Home Phone: () -		Business Phone: () -		Cell Phone: () -	
Position applied for:		Please indicate the days and times you are available to work:			
Have you ever applied here before: Yes _____ No _____		<input type="checkbox"/> Anytime Mon - From: To: Thr - From: To: Tue - From: To: Fri - From: To: Wed - From: To: Sat - From: To: Sun - From: To:			
Salary range desired:					
How many hours can you work weekly?					
Employment desired: <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME <input type="checkbox"/> FULL-TIME ONLY					
Are you legally authorized to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No			When are you available to start work?:		
Where did you hear about us?					

Education Information

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (City, State)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. Or Trade School				
Professional School				

Have you ever been convicted of a crime? Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation (A conviction will not necessarily result in the denial of employment):

Have you ever worked under a different name? Yes No

If YES, what was it and what was the reason?

Do you have any relatives or friends that work for the Company? Yes No

If YES, what is their name?

In Case of Emergency, Please Contact:

Name:
Home Phone:

Relation:
Business Phone:

Initials _____



Work Experience

Please list at least two jobs you have had beginning with your most recent job held.

1. Name and address of employer:	Name of last supervisor:	Employment dates:	Pay or salary:
		From: To:	Start: Final:
Phone number:	Your Last Job Title:		
Reason for leaving (be specific):			

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked here:

May we contact your present employer? Yes No

If NO, Please Explain Why and Please Provide Us With Another Work Reference:

2. Name and address of employer:	Name of last supervisor:	Employment dates:	Pay or salary:
		From: To:	Start: Final:
Phone number:	Your Last Job Title:		
Reason for leaving (be specific):			

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked here:

May we contact your this employer? Yes No

If NO, Please Explain Why and Please Provide Us With Another Work Reference:

Volunteer Experiences:

List your volunteer experiences, especially those working with young children and those that involved skills that would be of benefit in the position for which you are applying. Include the name of the organization, dates you worked with the organization, your responsibilities and a contact person.

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Personal Reference Information List three personal references.

DO NOT LIST relatives or previous supervisors.

Name: _____ Email: _____

- Friend Co-worker Teacher Pastor
 Current Client Former Client

Company: _____

Address: _____

Telephone where person can be reached 9a - 5p
(____) _____

DO NOT LIST relatives or previous supervisors.

Name: _____ Email: _____

- Friend Co-worker Teacher Pastor
 Current Client Former Client

Company: _____

Address: _____

Telephone where person can be reached 9a - 5p
(____) _____

DO NOT LIST relatives or previous supervisors.

Name: _____ Email: _____

- Friend Co-worker Teacher Pastor
 Current Client Former Client

Company: _____

Address: _____

Telephone where person can be reached 9a - 5p
(____) _____



APPLICATION FOR EMPLOYMENT

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by *Children's Workshop*, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Children's Workshop company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Children's Workshop, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Director of the Children's Workshop. Both the undersigned and Children's Workshop may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Children's Workshop may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I also understand that Children's Workshop's employment may be based on the successful passing of job-related physical examinations, per State of Michigan licensing rules For Child Care Centers.

I hereby release any and all prior employers or current employers from liability or claims arising out of the provision of information about my employment with such employer. I hereby waive any cause of action I might otherwise have against such employer arising out of the provision of information concerning my employment.

I further understand that my employment with Children's Workshop shall be **probationary** for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with Children's Workshop is terminable at will for any reason by either party.

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE AND COMPLETE. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Children's Workshop permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release Children's Workshop from any liability as a result of such contract.

Signature of applicant: _____ Date: _____

Printed name: _____

Children's Workshop is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this depends solely on your qualifications.