

**TLBC Weekday Learning Program
Employment Application**

Position Applied For: _____ Date Available: _____

PERSONAL

Name: _____

Last

First

MI

Address: _____ Home Phone: _____

_____ Work Phone: _____

Date of Birth _____ Email Address: _____

Do you have any medical conditions which may interfere with fulfilling the responsibilities of the positions for which you are applying? Yes _____ No _____

If yes, please explain:

Employment requires two Criminal Background Clearances. Is this acceptable to you? Yes ___ No ___

IN CASE OF EMERGENCY, PERSON TO CONTACT

Name: _____ Relationship: _____

Address: _____ Home Phone: _____

_____ Work Phone: _____

JOB EXPERIENCE (Most Recent First)

Company: _____ Position: _____

Supervisor: _____ Work Phone: _____

Salary: _____ Reason for Leaving: _____

Company: _____ Position: _____

Supervisor: _____ Work Phone: _____

Salary: _____ Reason for Leaving: _____

Company: _____ Position: _____

Supervisor: _____ Work Phone: _____

Salary: _____ Reason for Leaving: _____

Company: _____ Position: _____

Supervisor: _____ Work Phone: _____

Salary: _____ Reason for Leaving: _____

EDUCATION

High School: _____ Year Graduated: _____ GED: Y /N _____

College: _____ Year Graduated: _____ Certificate: _____

Do you have any special certificates/licenses that would benefit this position?

Please describe any volunteer work or other experience related to childcare:

REFERENCES:

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

I understand that I will be required to submit written information to demonstrate that I possess the education, orientation training, staff development, certification, and experience required by the job position.

I hereby certify that the information given in this application is true and complete to the best of my knowledge.

Signature

Date

