

Employment Application

Name: _____ Social Security # _____

Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell/Work Phone: _____

Position Desired: _____ Full Time: _____ Part Time: _____

If part time, when available: _____

Education History

High School: _____
Name and location Year Graduated

College: _____
From To Name and location Year Graduated

From To Name and Location Year Graduated

Credentials or Certificates Held

List courses of study or training earned in Early Childhood Education,
Child Development, and Elementary Education

Work Experience

Name of Employer: _____ Position: _____

Address: _____ Supervisor's Name: _____

Reason for Leaving: _____

Name of Employer: _____ Position: _____

Address: _____ Supervisor's Name: _____

Reason for Leaving: _____

Name of Employer: _____ Position: _____

Address: _____ Supervisor's Name: _____

Reason for Leaving: _____

Reference

1.

Name	Phone #	Years known
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2.

Name	Phone#	Years known
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3.

Name	Phone#	Years known
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Briefly tell us why you are interested in working at Building Blocks Play and Learning Center. _____

If your answer to any of the following questions is "yes", attach a detailed statement.

Have you ever been discharged from a job?_____

Have you been convicted for other than minor traffic violation?_____

School Schedule

Monday

Tuesday

Wednesday

Thursday

Friday

I understand may be required to submit proof of previous employment, education, or any other statements in this application. I authorize of this and other information covering job related factors of purpose of verification and determination of suitability for employment through a background check. I certify that the information on this application is true and correct to the best of my knowledge. I also understand that if employed by Building Blocks Play and Learning Center Inc. I will be required to have a TB skin test, provide a current physical examination form, be fingerprinted, and have a background check.

Applicant's Signature

Date

