



Little Learners

Early Childhood Center

Making Memories, Marking Milestones

Application for Employment

General Information			
Full Name:			
Street Address:		City, State:	Zip Code:
Phone Number:		Email:	
Date Available:		Salary Desired:	
Desired Position:		Full Time or Part Time	
Have you ever worked for this company?	Yes or No	If so, when?	
Education			
High School		College	
Address:		Address:	
From: _____ to _____		From: _____ to _____	
Did you graduate?	Yes or No	Did you graduate?	Yes or No
Degree earned:		Degree earned:	
Other		Other	
Address:		Address:	
From: _____ to _____		From: _____ to _____	
Did you graduate?	Yes or No	Did you graduate?	Yes or No
Degree earned:		Degree earned:	
References			
Full Name:			
Phone Number:	Relationship:	Company:	
Full Name:			
Phone Number:	Relationship:	Company:	
Full Name:			
Phone Number:	Relationship:	Company:	

Work Experience (include any previous child care experience)

Name of Employer:

Address:

Job Title:

Phone Number:	Start/End Dates:	Salary:	Reason for Leaving:
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Name of Employer:

Address:

Job Title:

Phone Number:	Start/End Dates:	Salary:	Reason for Leaving:
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Name of Employer:

Address:

Job Title:

Phone Number:	Start/End Dates:	Salary:	Reason for Leaving:
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Essay Response Questions: Please respond to the following four questions in the space provided.

1. Describe your best day at your last job.

2. What does “personal accountability” mean to you?

3. What are some things you would do to build relationships with children?

4. In the space below, write a sample “daily note” to parents for a child who hit another child and did not follow directions in the morning but showed improvement in the afternoon.

I affirm that the facts set forth above in my application for employment are true, correct and complete to the best of my knowledge. I understand that I may be required to submit information not requested on this application form; that the employing company may verify any information provided by me in the employment process; and that incomplete information or omission of my signature is just cause for rejection of my application. I understand and agree that, if hired, my employment would be contingent upon conditions specific to the position for which I am applying. I also understand that any omission of information, or erroneous information provided in any part of the employment process, would be sufficient cause for discharge.

Signature of Applicant _____

Date _____