

Calvary Hills Mother's Day Out

Employee Application

Position Applying For: _____

General Information:

Full Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Personal Disclosure Information: Please circle appropriate response.

Are you currently CPR certified? Yes / No

Are you currently First Aid certified? Yes / No

Are you authorized to work in the US? Yes / No

Have you ever been convicted of crime? Yes / No

Request for Background Check and Authorization:

Every Applicant must complete and pass a background check for employment.

I hereby authorize the release any information which pertains to any record of convictions contained in law enforcement file or in any criminal file maintained on me whether local, state, or federal. I hereby release local, state and federal law agencies from all and any liability resulting for such disclosure.

Applicant's Signature: _____

Print name, print maiden name if applicable: _____

Education:

Did you graduate high school? Yes / No Last grade completed: _____

Did you attend college? Yes / No How many years? _____

If graduated, your degree is in _____

Any additional education that would assist you in working with children?

Spiritual History: *Due to the fact this a Christian based program, please answer the following questions.*

Have you accepted Jesus as your Lord and Savior? Yes / No

Religious affiliation: _____

As a Christian, what could you offer the children if you are employed by this program?

Employment Background: *Start with most recent employer*

1. Dates: _____ Position; _____
Employer: _____
Address: _____
Phone Number: _____
Reason for Leaving: _____
2. Dates: _____ Position; _____
Employer: _____
Address: _____
Phone Number: _____
Reason for Leaving: _____
3. Dates: _____ Position; _____
Employer: _____
Address: _____
Phone Number: _____
Reason for Leaving: _____

Previous experience working with children: _____

References:

1. Name: _____ Phone: _____
Address; _____
Relationship: _____
2. Name: _____ Phone: _____
Address; _____
Relationship: _____
3. Name: _____ Phone: _____
Address; _____
Relationship: _____

I certify that answers given herein are true and complete to best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at the employment decision. I understand that false or misleading information given in my application or interview may result in termination. I understand that employment at this program is "at will", which means that either I or this program can terminate the employment relationship at any time, with or without notice and for any reason. I understand that I am required to abide by rules and regulation of this program.

Applicant's Signature: _____ Date: _____