



EMPLOYMENT APPLICATION

It is the policy of Nation's Capital Child and Family Development to provide equal opportunity to all qualified persons without regard to race, age, color, sex, religion, national origin, physical disability, sexual orientation, marital status or medical condition

Please answer all questions in each section completely and accurately even when attaching a resume. Please print legibly.

DATE: _____

NAME: _____
(FIRST) (MIDDLE) (LAST)

ADDRESS: _____
(STREET) (APT#)

(CITY) (STATE) (ZIP CODE)

TELEPHONE: _____ SOCIAL SECURITY: _____

Position applying for: _____

Circle all that apply: **FULL TIME** **PART TIME** **SUBSTITUTE**

Days & hours available for work? _____

Are you available to work overtime if necessary? Circle one: **YES** **NO**

Are you available to work weekends if necessary? Circle one: **YES** **NO**

If selected, what date can you start work? _____

Salary desired? _____

PERSONAL INFORMATION

1. Do you have a reliable means of transportation to and from work? **YES NO**

2. Are you at least 18 years of age? **YES NO**

3. Can you present evidence of your citizenship? **YES NO**

4. Are you able to perform essential duties, functions, and responsibilities of the position for which you are applying? **YES NO**

5. If no, describe the duties, functions, and responsibilities that you cannot perform: _____

6. Are you currently employed? **YES NO**

7. May we contact your current employer and/or your former employees? **YES NO**

(NAME)	(COMPANY)	(PHONE)

8. Have you ever been convicted of a criminal offense? **YES NO**

9. If yes, state the nature of the crime/s (felony or serious misdemeanor), when and where convicted and disposition of the case: _____

***NOTE:** No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the mitigating circumstances and the relevance of the offense to the position applied for may be considered. All successful applicants must provide a Criminal Record Background check no older than 30 days prior to being hired.*

EDUCATION, TRAINING & EXPERIENCE

	NAME & ADDRESS	# OF YEARS COMPLETED	DID YOU GRADUATE	CERTIFICATE
High School				
College/University				
Vocational/Business				
Post Graduate				

1. Do you speak, write, or understand any foreign languages? **YES NO**
 Explain: _____

2. Do you have any other experience, training, qualifications and/or skills which you feel make you especially qualified for work in a child development center? _____

3. Are you certified and/or licensed for the position applied for? **YES NO**
 Name of certificate: _____
 Issuing state: _____ Certification/License Number: _____
 Expiration Date: _____ (Please attach a copy of the document)

4. Has your certification and/or license ever been revoked or suspended? **YES NO**
 Explain: _____

EMPLOYMENT HISTORY

1. Name of Employer _____
 Date of employment _____
 (FROM) (TO)

Salary	_____	_____
	(STARTING)	(END)
Supervisor	_____	_____
	(NAME)	(PHONE)
Address	_____	
Type of Business	_____	
Your position	_____	
Duties & functions	_____	

Reason for leaving	_____	

2. Name of Employer _____

Date of employment	_____	_____
	(FROM)	(TO)
Salary	_____	_____
	(STARTING)	(END)
Supervisor	_____	_____
	(NAME)	(PHONE)
Address	_____	
Type of Business	_____	
Your position	_____	
Duties & functions	_____	

Reason for leaving	_____	

3. Name of Employer _____

Date of employment	_____	_____
	(FROM)	(TO)
Salary	_____	_____
	(STARTING)	(END)
Supervisor	_____	_____
	(NAME)	(PHONE)
Address	_____	
Type of Business	_____	
Your position	_____	
Duties & functions	_____	

Reason for leaving	_____	

Have you obtained any special skills as a result of military service? YES NO
 Explain: _____

REFERENCES

List three persons, not related to you, who have knowledge of your work performance within the last three years

1. Name _____
Address _____
Occupation _____
Telephone _____
of years acquainted _____
Relationship _____

2. Name _____
Address _____
Occupation _____
Telephone _____
of years acquainted _____
Relationship _____

3. Name _____
Address _____
Occupation _____
Telephone _____
of years acquainted _____
Relationship _____

Please read carefully

I, _____, hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application may cause immediate discharge if I am employed, regardless of the time elapsed before discovery.

I, _____, understand that nothing contained in this application or conveyed during my interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and Nation's Capital Child and Family Development. In addition, I understand and agree that if I am employed; my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or Nation's Capital Child and Family Development. And that no promises or representations contrary to the foregoing are binding on Nation's Capital Child and Family Development, unless made in writing and signed by me and the President & CEO of Nation's Capital Child and Family Develop or his designee.

I, _____, hereby authorize Nation's Capital Child and Family Development to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further authorize the references I have listed to disclose to Nation's Capital Child and Family Development, my former employers, all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

(APPLICANT SIGNATURE)

(DATE)