



## The Owl's Nest Daycare Employment Application

**INSTRUCTIONS:** Before completing this form, please read the minimum requirements and/or desirable qualifications for the job in which you are interested. Your further consideration for the position will depend upon the accurate information you provide on this application regarding your ability to meet or exceed these requirements. This application must be filled out completely and signed to be accepted for review.

**PLEASE PRINT LEGIBLY IN BLUE OR BLACK INK OR TYPE**

Name: \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone Number: (    ) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

### EMPLOYMENT DESIRED

Job Title/Position applying for: \_\_\_\_\_

Preferred Schedule:    Full-time            Part-time            As needed (PRN)            Any available schedule

Date Available to start: \_\_\_\_\_ Wage Desired: \_\_\_\_\_

How did you hear about this job? \_\_\_\_\_

Have you ever applied to or worked for The Owl's Nest Daycare?            YES    NO

If yes, please provide the dates and position held: \_\_\_\_\_

Do you have any friends or relatives employed with this center?            YES    NO

If yes, please list names and relationship to you: \_\_\_\_\_





## AVAILABILITY

Please indicate the days you are willing and able to work:

Monday      Tuesday      Wednesday      Thursday      Friday      Saturday      Any day

Please indicate any times you are unable to work on the days circled above: (Ex. Mondays 4:00 – 6:00 PM)

\_\_\_\_\_

Why are you applying at our center? \_\_\_\_\_

Are you fluent in any languages other than English? \_\_\_\_\_

If hired, do you have a reliable means of transportation to and from work?      YES      NO

Are you at least 18 years of age?      YES      NO

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?      YES      NO

Are you able to perform the essential functions of the job for which you are applying?      YES      NO

If no, describe the functions that cannot be performed: \_\_\_\_\_

Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Applicants may be subject to passing a medical examination as well as a pre-employment drug screen.

Have you ever been convicted of a felony or misdemeanor or been on parole or probation?      YES      NO

If yes, list all convictions and dates \_\_\_\_\_

\*\*Note: Failure to disclose all facts and convictions will result in disqualification from employment or termination from employment.

## EDUCATION

Do you have a high school diploma or GED?      YES      NO

If no, what was your highest grade level of education completed?    7    8    9    10    11    12

List below all course work, special training or seminars that you have taken that relate to the requirements of this position.

If your training resulted in a degree, you need only list the major and type of degree.



High School, College, Vocational School or Institute or Other Schools Attended (Name, city, state)	Major Subjects of Course of Study	Degree Obtained	If no Degree, total hours completed

Use the space below to fully describe any additional job related skills, knowledge, licenses or special training you possess which relate to this position:

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## EMPLOYMENT HISTORY

Please list your most recent work experience first. Carefully account for all employment, paid or unpaid, over the last ten (10) years. If you were not employed or were a student for this period of time, please indicate such on the application. Use additional sheets, if necessary. All additional sheets must be in the format as presented below and signed by the applicant. If you wish to elaborate on your experience, a resume may be attached, but this section MUST be completed in its entirety. A resume should not be a substitute for the information required in this section.

EMPLOYER: _____	POSITION HELD: _____
ADDRESS: _____	PHONE NUMBER: _____
DESCRIBE YOUR DUTIES: _____	
_____	
DATES WORKED: FROM: _____	TO: _____
(MM/YY)	(MM/YY)
SUPERVISOR'S NAME: _____	SUPERVISOR'S TITLE: _____
ENDING SALARY: \$ _____	REASON FOR LEAVING: _____
MAY WE CONTACT THIS EMPLOYER?      YES      NO	
EMPLOYER: _____	POSITION HELD: _____
ADDRESS: _____	PHONE NUMBER: _____
DESCRIBE YOUR DUTIES: _____	
_____	
DATES WORKED: FROM: _____	TO: _____



(MM/YY)	(MM/YY)
SUPERVISOR'S NAME: _____ SUPERVISOR'S TITLE: _____	
ENDING SALARY: \$ _____ REASON FOR LEAVING: _____	
MAY WE CONTACT THIS EMPLOYER?      YES      NO	
EMPLOYER: _____ POSITION HELD: _____	
ADDRESS: _____ PHONE NUMBER: _____	
DESCRIBE YOUR DUTIES: _____	
DATES WORKED: FROM: _____ TO: _____	
(MM/YY)	(MM/YY)
SUPERVISOR'S NAME: _____ SUPERVISOR'S TITLE: _____	
ENDING SALARY: \$ _____ REASON FOR LEAVING: _____	
MAY WE CONTACT THIS EMPLOYER?      YES      NO	
EMPLOYER: _____ POSITION HELD: _____	
ADDRESS: _____ PHONE NUMBER: _____	
DESCRIBE YOUR DUTIES: _____	
DATES WORKED: FROM: _____ TO: _____	
(MM/YY)	(MM/YY)
SUPERVISOR'S NAME: _____ SUPERVISOR'S TITLE: _____	
ENDING SALARY: \$ _____ REASON FOR LEAVING: _____	
MAY WE CONTACT THIS EMPLOYER?      YES      NO	

## REFERENCES

Please provide the names of three (3) professional references. These references will not be contacted until or unless you are selected for employment with The Owl's Nest Daycare.

Reference Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

How do you know this person? \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

How do you know this person? \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

How do you know this person? \_\_\_\_\_





**Please read and initial next to the following statements:**

\_\_\_\_\_ 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 undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize The Owl's Nest Daycare 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 any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosures. I release from all liability anyone supplying such information and I also release The Owl's Nest Daycare from any liability that might result from making an investigation.

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and The Owl's Nest Daycare. 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 The Owl's Nest Daycare, and that no promises or representations contrary to the foregoing are binding unless in writing and signed by me and The Owl's Nest Daycare's designated representative. I further understand that my position as an employee is contingent upon the completion of a background questionnaire as well as the successful completion of a drug test.

\_\_\_\_\_ I understand that if I am selected for employment with The Owl's Nest Daycare, that employment is contingent upon successful passing of a criminal background check and drug screening.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

