

## Early Learning Center

## **Application for Employment**

ersonal Information Date:					
Name: e-mail address:	e-mail address:				
Nantucket Address:					
Permanent Address:					
Phone #: Second Phone #:					
Are you at least 18 years of age? Yes No					
Are you legally authorized to work in the United States? Yes	_ No				
If you are hired, will you be able to submit proof of the above? Yes	s No				
Have you ever been convicted of a felony? Yes No Reason:					
Employment Desired  Position applied for:					
Date you are available to start:	_ Desired salary:				
Have you ever applied to Small Friends before?					
How did you become aware of the position?					
General					
Special Areas Of Interest:					
Special Skills:					



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Education	Name of School		Sub	jects	Degree Earned
High School					
College		1			
Graduate					
Other					
Have you ever	taken a course in child developmen	t c	or child	psycholo	logy?
At which institu	tion?				
Driving Skills					
Do you have a	a valid driver's license?				
If yes, State	License Number		Ехр	oiration D	Date
Has your driver	's license ever been suspended or rev	ok	ed? Ye	es	No
If yes, provide	details of the incident(s) on a separate	pi	ece of p	aper.	
Employment F	listory				
Dates:	Name of Employer/Phone #	,	Salary	Positio	on Reason for Leaving



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References						
Please give the names and phone numbers of three people not related to you whom you have known for at least one year.						
Name:	Phone:	Business:				
Certification (Please Read Carefully before signing)						
I hereby certify and affirm that the information provided in conjunction with the application process, including the information provided on this Application for Employment and any resume submitted is true, accurate, and complete and that I have withheld nothing that would, if disclosed, affect this application unfavorably.						
I hereby authorize Small Friends to investigate all information pertinent to my Application for Employment in order to determine my qualifications for employment which will include contacting former and/or current employers or any person listed on this Application for Employment. I hereby authorize all persons having information relevant to my application to provide that information to Small Friends and I hereby agree to hold Small Friends and all those providing information to Small Friends from any liability arising out of or as a result of the request for, provision of, or use of such information I understand that any offer of employment may be rescinded or my employment terminated if my references are inadequate or unacceptable to Small Friends or if I violate any of the provisions of the Certification. I further understand that if I am hired by Small Friends, I must abide by all rules and policies of Small Friends which, other than the "at-will" employment policy, may be changed without notice at the discretion of Small Friends.						
In case of emergency please notify:						
Annlicant's Signature:	Date:					