

Personal Information

| | | | | | | |
|--|--------------------------|---|------|-----------------------|------------|--------------|
| Last | First | MI | SSN# | Email | | |
| Street Address | | City | ST | Zip | Home Phone | Mobile Phone |
| Are you entitled to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> | | Are you 18 or older? | | If yes, Date of Birth | | |
| Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? Yes <input type="checkbox"/> No <input type="checkbox"/> | | If yes, please explain: | | | | |
| Military Service? Yes <input type="checkbox"/> No <input type="checkbox"/> | | Previous experience working with children? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| How did you hear about this position? | | If yes, what kind of experience do you have in working with children? | | | | |
| Expected Hourly Rate | Expected Weekly Earnings | Date Available | | | | |

Prior Work Experience

| | Current or Most Recent | | Prior | | Prior | |
|------------------------------|------------------------|----|-------|----|-------|----|
| Employer | | | | | | |
| Address | | | | | | |
| City, ST, ZIP | | | | | | |
| Telephone | | | | | | |
| Name of Immediate Supervisor | | | | | | |
| Dates of Employment | From | To | From | To | From | To |
| Position/Job Title | | | | | | |
| Pay | | | | | | |
| Reason for Leaving | | | | | | |
| May We Contact | Yes | No | Yes | No | Yes | No |

Education

| | Name/Location | Last Year Complete/ Graduation Year | Degree | Major or Emphasis |
|--|---------------|-------------------------------------|--------|-------------------|
| High School | | | | |
| College/University | | | | |
| Trade School | | | | |
| Other | | | | |
| List any applicable special skills, training or proficiencies. | | | | |

Personal References

| | Reference 1 | Reference 2 | Reference 3 |
|---------------|-------------|-------------|-------------|
| Name | | | |
| Address | | | |
| City, ST, ZIP | | | |
| Telephone | | | |

| | | |
|--|-----------|------|
| Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records. | Signature | Date |
|--|-----------|------|