

## **Blessed Beginnings Learning Center Application for Employment**

We are an Equal Opportunity Employer and are committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume. Send the completed application to BlessedBeginningsLC.1999@gmail.com.

Personal Information									
Name									
Address				City	State		Zip		
Phone Number	Mobil	e Number	Email Address						
Are you legally eligible for employment in the United States?  ☐ Yes ☐ No				Have You Ever Been Convicted Of A Felony or Misdemeanor? ☐ Yes ☐ No					
Have you ever worked under a different name?  ☐ Yes ☐ No				If Yes, please include:					
Are You At Least 18 Years of Age? ☐ Yes ☐ No				If Yes, please explain:					
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?									
Position									
Position You Are Applying For Av			Available	Available Start Date		What are your salary expectations for this position?			
Employment Desired									
Age Group Preference if applying for a classroom position:									
□ No Preference       □ Infants       □ Toddlers       □ Two's       □ Three's       □ Preschool       □ Before/After Care									
Education			_		·				
School Name		Location	Yea	ars Attended	Degre	e Received	Major		
List course or relevant training (i.e. CPR,									
First Aid, Child Development) List other skills (i.e. office, clerical,									
achievements and training in other fields)									
References (You must list at least 3 references- references can include previous supervisor (do not list friends or family) We must be able to contact them within 24 hours.)									
Name				Title	C	ompany	Phone		

Employment History (begin with most recent)									
Employer (1)	Job Title		Dates Employed						
Work Phone	Starting Pay R	ate	Ending Pay Rate						
Address	City	State		Zip					
Employer (2)	Job Title			Dates Employed					
Work Phone	Starting Pay Rate			Ending Pay Rate					
Address	City		State	Zip					
Employer (3)	Job Title		Dates Employed						
Work Phone	Starting Pay R	ate	Ending Pay Rate						
Address	City		State	Zip					
Employer (4)	Job Title		Dates Employed						
Work Phone	Starting Pay Rate			Ending Pay Rate					
Address	City		State	Zip					
Signature Disclaimer									
I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I give permission to contact references. Credit references may be used if in compliance with the Fair Credit Reporting Act of 1970 and the Consumer Credit Reporting Reform Act of 1996									
Name (Please Print)	Signature								
Date									