

Mater Dei Child Care Center Employment Application

Personal Information

First Name	L	Last Name			
Address	City	State	Zip		
Phone		Email			
Are you a citizen of the Uni	ted State?	_ YesNo			
If no, are you authorized to	work in the United	d State? Yes _	No		
Have you ever been convi	cted of a crime of	ther than a mirror traff	ic incident?		
If yes, please explain:					
<u>Position Details</u>					
Position Apply For		Appli	Application Date		
No Preference	Toddler	Preschool	School age		
Preferred Hours: N	o Preference	Full Time	Part Time		
Have you ever been emplo	oyed with us befor	re? Yes	_No		
On what day would you be	e available to start	t working?			

Experience

Employment History (most recent first)

Company Name:		Date: (year)	to	
Position:	Supervisor:	Phone Number:		
Company Name:		Date: (year)	to	
Position:	Supervisor:	Phone Number:		
Company Name:		Date: (year)	to	
Position:	Supervisor:	Phone Number:		
May we contact prev	ious employers?	Yes No		

Education:

School	Name & Address of School	Course of Study		d you adate	List Diploma/Degree			
High School								
College								
Other								
Are you certified in Infant/Adult First Aid & CPR? Yes No Are you willing to enroll in classes to complete a CDA? Yes No Would you be needing child care? Yes No If yes, what is the date of birth of the child								
References								
Nan	ne	Address		Pho	Phone Number			
2.								
3.								
Authorization for investigative Processes: I certify the information on this application is accurate and complete. Neither this application nor any interview creates a contract for employment or any benefit. If hired, I understand I or the company may terminate my employment at any time without case.								
Signature of	of Applicant				Date			