

APPLICATION FOR EMPLOYMENT



THE CHILD DEVELOPMENT CENTER AT YORK FIRST CHURCH OF THE BRETHREN

An Equal Opportunity Employer
 2710 Kingston Road, York, PA 17402
 Phone: (717) 757-6390 email: 1stchurchcdc@gmail.com

PERSONAL INFORMATION

Date: ____ / ____ / ____

Social Security #: _____ - _____ - _____

Name: _____
Last
First
Middle

Address: _____
Street
City
State
Zip

Phone #: _____

Are you 18 years or older? Yes: No:
 Are you either a U.S. Citizen or Alien authorized to work in the U.S.? Yes: No:

EMPLOYMENT DESIRED

Position: _____ Date you can start: _____ Salary desired: _____

Are you employed now? Yes: No:
 If so, may we inquire of your present employer? Yes: No:
 Have you ever applied here before? Yes: No:
 If so, when? _____

Education	Name and Location of School:	# of years attended:	Did you graduate?	Subjects studied:
High School				
College				
CDA Credential or other Early Childhood Education				

FORMER EMPLOYERS: (List below your last three employers, starting with the most recent)

Date Month & Year	Name & Address of Employer	Salary	Position	Reason for leaving
From:				
To:				
From:				
To:				
From:				
To:				

(Continued on other side)

REFERENCES: Names & Contact information of 3 persons (non- relatives), whom you have known at least one year

Name:	Address & Email Address:	Phone Number:
1		
2		
3		

PHYSICAL RECORD:

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes: No:

If yes, what can be done to accommodate your limitation:

Please describe:

In case of emergency, please contact:

Name

Address

Phone Number

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice. **Initials:**

Date

Signature

Office use only:

Position:

Rate of pay:

Health appraisal:

Disclosure statement:

State police clearance:

NOSOR:

Child abuse clearance:

References: