



APPLICATION FOR EMPLOYMENT

Job Applying For: _____ Full-Time: _____ Part-Time _____

Date Available to start _____

We are open Monday – Friday from 6:30am – 6:00pm. Please indicate the days and times which you are available to work: _____

Name: _____

Address: _____

City, State: _____ Zip: _____

Social Security Number: _____ Telephone: _____

Birth Date (month and day): _____

Other Names You Have Worked Under: _____

Last Physical Exam Date: _____ Last TB Test: _____

Education:

High School/College	Major	Dates Attended	Certificate/Degree	Completion Date

Licenses or certificates held, or credentials qualifying you for this employment: _____

Special Skills and Talents (such as swimming, computers, musical instruments, etc.), which you may care to list:

Experience:

1. Employer's Name and Address: _____

Job Description: _____

Employed from _____ to _____ Salary _____

Supervisor's Name, Title, and Phone number: _____

Can we contact your supervisor? _____ Reason for leaving _____

2. Employer's Name and Address: _____

Job Description: _____

Employed from _____ to _____ Salary _____

Supervisor's Name, Title, and Phone number: _____

Can we contact your supervisor? _____ Reason for leaving _____

3. Employer's Name and Address: _____

Job Description: _____

Employed from _____ to _____ Salary _____

Supervisor's Name, Title, and Phone number: _____

Can we contact your supervisor? _____ Reason for leaving _____

Volunteer or Unpaid Experience:

References: (List at least two professional)

Names and Addresses	Title	Phone Number

Are you legally employable within the United States at the present time? Yes ___ No ___

I authorize Tonawanda Kidsabilities to contact former employers and educational organizations regarding my employment and education. I authorize former employers and educational organizations to fully and freely communicate information regarding my previous employment & attendance. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

Signature: _____ Date: _____

QUESTIONNAIRE

1. In talking to parents, you should....

2. What role should parents play in a child care program?

3. How do you feel about parents who work and leave their children in daycare?

ABOUT YOU On a scale of 1 – 10, please indicate the level which best describes you.
1-Never 5-Sometimes 10-Always

1. Are you conscious of your strengths and weaknesses? ____
2. Are you confident? ____
3. Do you have a sense of humor when things go wrong? ____
4. Are you flexible in the workplace? ____
5. Are you organized? ____
6. Do you take responsibility for your own actions? ____
7. Do you enjoy working with a team to get the job done? ____
8. Do you maintain honesty & integrity in your life? ____
9. Do you take initiative in your life? ____
10. Do you try to anticipate parent's and children's needs? ____
11. Do you communicate effectively? ____
12. Can you problem solve without reacting emotionally? ____
13. Do you remain positive in a negative situation? ____
14. Do you guide & inspire others in the workplace? ____
15. Are you creative? ____
16. Are you dependable? ____
17. Are you reliable? ____