

Application for Employment
Klassy Kids, INC.

Position applying for:	Classroom preferred:
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General Information

Social Security Number	Last Name	First Name	Middle Name
Address (street number and name)		City, Zip	County
Home Phone	Alternate Number (Cell)	Email Address	

Date of Birth: _____ N.C. Driver's License Number: _____

Have you ever been convicted of breaking the law other than a minor traffic violation? (The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.)

NO _____ YES _____ (if so, please explain)

Education

Please circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4

Schools	Name and Location	Dates Attended	Course of Study	Degree/Diploma
High School	To			
College or University				
Graduate or Professional				
Educational, Vocational schools				

Childcare training you have complete in the last three years (first aid, CPR, CDA, BSAC, etc.):

Work History

(Please list childcare/early childhood experience first)

Current/Last Employer			Address		
Job Title			Supervisor's Name		No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ per	Ending Salary \$ per	Reason for Leaving	May we contact? Yes No	
Date Separated (mo/yr)			Duties:		
Full Time	Years	Months			
Part Time	Years	Months			
If part time, number of hours per week					

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Full Time	Years	Months			
Part Time	Years	Months			
If part time, number of hours per week					

References

(Please list 3 Names, addresses and phone numbers of personal references that are not related)

Name	Address	Phone Number
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Field Knowledge/Experience

Please list familiar curriculums (Montessori, Creative Curriculum...) _____

What are your strengths as you see them, when it comes to working with children _____

What areas would you like more information in _____

What has been your most important lesson while working in the early childhood field _____

Please explain any involvement with the Environment Rating Scales _____

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registrations, and licensing boards and others to furnish whatever detail is available concerning my qualifications. I authorize investigations of all statements made in this application and understand that false information of documentation, or failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or dismissal if I am employed, and (or) criminal action. I further understand that dismissal on unemployment shall be mandatory if fraudulent disclosures are given to meet position qualifications.

Signature of Applicant _____ Date _____