

Learning Ladder Preschool Academy

Application for Teaching Position

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Today's Date _____

Last name _____ First name _____ Middle name _____

Street Address _____

City _____ State _____ ZIP _____ email address: _____

Telephone _____ Social Security # _____

Desired Position: (Circle One) Floater Camp Adventure

How did you hear of this opening? _____

When can you start? _____ Desired Wage \$ _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.) Yes No

Are you looking for full-time employment? Yes No

If no, what hours are you available? _____

Are you 18 years or older? Yes No

Do you have a high school diploma or GED? Yes No

Do you have a current TB test? Yes No

Are you CPR/First-Aid certified for infants & toddlers? Yes No

Have you ever completed CCOT (Child Care Orientation Training)? Yes No

Have you ever been convicted of a felony? Yes No

If yes, please describe conditions. _____

Education

School Name and Location	Year	Major	Degree
High School _____	_____	_____	_____
College _____	_____	_____	_____
College _____	_____	_____	_____
Post-College _____	_____	_____	_____
Other Training _____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

Employment History

(Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

1. What is your favorite children's book? _____
2. What is your favorite children's song? _____
3. What is your favorite TV show? _____
4. If you could pick anything to do on the weekend and money was no option, what would you do? _____

5. If a child in your classroom bit another child, what actions would you take?

6. If it was time for lunch and your kids were already on their way to the dining room, and the cook informed you it would be another 15 minutes until lunch, what would you do?

7. If you were in charge of a classroom and it was time to clean up, but none of your children were listening to you, what would you do to their attention to get them to clean up?

If you were hired at Learning Ladder Preschool Academy, do you have a back-up plan in place to prevent you from missing work? Yes No (for flat tires, sick kids, etc.)

If yes, what is your back-up plan?

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the Owners/Director, has any authority to alter the foregoing.

Signature _____ Date _____

FOR OFFICE USE ONLY

Please list 3 References.

3 Letters of Reference will also need to be mailed in to our office before the job will be offered.

1. Name _____
Relationship _____

Address: _____
Phone Number: _____

2. Name _____
Relationship _____

Address: _____
Phone Number: _____

3. Name _____
Relationship _____

Address: _____
Phone Number: _____

We will contact the references you have listed. We also require 3 letters of reference to be mailed to our office in order to continue the hiring process. If we do not receive 3 letters of reference within 10 days, we will not continue with the hiring process with you.

Applications are kept on file for 60 days