

APPLICATION FOR EMPLOYMENT



GRAVEL HILL CHRISTIAN CHILD CARE

131 Gravel Hill Rd, Palmyra, PA 17078

Phone & Fax: 717-838-3620

To complete form, please print.

Date of Application:

Personal Information

Full Name:		
Address:		
Email:	Phone:	
Do you have a valid Drivers License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Driver's License Number:	Issuing State:	
Have you ever been convicted of any crimes other than minor traffic violations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes", please explain:		

A background criminal and child abuse check and an FBI fingerprint clearance will be made on each prospective employee. Fees for this will be covered by employee or deducted from your first paycheck.

Position Information

Position Applied For:	Desired Salary:
Select One: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Date Available to Start:
Days & Hours Available:	A.M.- M: Tu: W: Th: F: P.M.- M: Tu: W: Th: F:

Your Christian Walk

Please tell us about your walk with Jesus Christ:		
Other:		
Which church are you currently active in?		
List business, professional, or Christian organizations to which you belong:		

Educational Background

School Name	Address	Years Completed:	Did you graduate?	Diploma/Degree:
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vocational/Business			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Child Dev. Training Hrs			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment History

Please list all present and past employment, beginning with your most recent employer. If you need more space, continue on a separate page and attach it.

Employer Name	Address	Phone	Type of Business
Supervisor's Name	Your Position	Your Responsibilities	Number of Certified Childcare Hours

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References

If not attached to your resume, please attach two written references from persons not related to you, citing your involvement with children, in what capacity do they have this knowledge, and the approximate length of time (days/hours) they have observed or have firsthand knowledge of your working with children.

Please have the two references state how long they have known you and also include their name, address, and phone number

Signature

Attachments:

Resume References Additional Employment History