

# A Plus Childcare and Sitting Agency

## Employment Application

*Wrapping our hands of love, care, and protection around the needs of families*



<b>Full Name: First, Middle, Last</b>	<b>Home Phone:</b>	<b>Cell Phone:</b>
<b>Current Address:</b>		<b>DOB:</b>
<b>Soc. Sec. #:</b>	<b>Driver's Lic# and State:</b>	<b>Email:</b>

We are dedicated to hiring professionals who are energetic, motivated, and possess integrity. A Plus Childcare Services and Sitting Agency is an Equal Opportunity Employer. Applicants must show they understand and are able to meet the following requirements for employment by *initialing each item below.*

- High School Graduate or G.E.D recipient
- Negative TB Test and will provide current medical documentation
- United States Citizen, or legally authorized to work in the United States
- Will provide Social Security Card or Birth Certificate
- Will submit to drug and alcohol testing as required
- Will complete an FBI criminal background check
- Will complete a Child Maltreatment Central Registry check
- Physically able to safely supervise young children and perform necessary job functions
- Will maintain professional appearance and conduct at all times

### GENERAL INFORMATION

Specific Job position for which you are applying/Position Desired: \_\_\_\_\_--\_\_\_\_\_

Employment Desired:  Full-time only  Part time only  Full or Part time  On Call  Weekend

Years of Experience in Desired Postion: \_\_\_\_\_

Hourly Rate Desired: \_\_\_\_\_

Hours available: Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat. \_\_\_\_\_ Sun. \_\_\_\_\_

Are you seeking temporary or permanent work? \_\_\_\_\_

### 3 PERSONAL REFERENCES (do not list family members)

Name	Address	Phone Number	Relationship (i.e Supervisor, Coworker,)

**EDUCATIONAL EXPERIENCE**

High School attended/address/year graduated \_\_\_\_\_

College attended/Degree or number years completed/Major \_\_\_\_\_

Child Development Associate Certification \_\_\_\_\_

List courses completed or relevant childcare training (CPR, First Aid, Child Development, etc.): \_\_\_\_\_

\_\_\_\_\_

List other skills, vocational, and technical training \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT HISTORY (begin with most recent)**

Begin/End Date	Begin/End Salary	Employer/Address	Supervisor's Name & Ph:	Your title and duties	Reason for leaving

**OFFENSES – Criminal background checks will be conducted on all applicants.**

Have you ever pled guilty, no contest or been convicted of any criminal offense? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Has a report of child maltreatment ever been made against you? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Has a court ever denied parental, custodial, or visitation rights as a result of neglect or abuse of a child? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

While employed in a childcare program, have you ever been the subject of disciplinary action or been responsible for a child care facility receiving an administrative or disciplinary action? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

1. What are your goals and objectives?

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2. Why should A+ Plus Childcare Services and Sitting Agency hire you?

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3. Define PROFESSIONAL CONDUCT. How does it relate to a childcare program or job you are applying for?

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4. Define CUSTOMER SERVICE. How does it relate to a childcare program or the job you are applying for?

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5. Describe your leadership skills. How does it relate to a childcare program or the job you are applying for?

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**An application form sometimes makes it difficult to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.**

I hereby certify that all information contained in this application is true and correct. I understand that any misrepresentation, falsification, or consequential omission of information may render this application void, or if employed may result in immediate termination. I further consent and agree to submit to any job related medical exams or drug tests that might be required and agree to provide any information that may be needed to facilitate such tests. I authorize the individuals and institutions named above to give information regarding my employment, character, and qualification, hereby releasing them from all liability for issuing such information.

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Printed name/Signature of Applicant

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Date

**Office Use Only:**

Date Submitted:	Time:	Position:
Director Proceed + or -	Interview:	Date Hired: