



## Little Scholars Child Development Center, Inc.

“Where early development is fundamental to the growth of your child.”

### Employment Application

Full Name:	DOB:	Phone
Current Address:	City	State      Zip
Social Security #:	Driver's License No:	Email:

Thank you for choosing Little Scholars CDC, Inc. in your career path. We are dedicated to hiring professionals who are energetic, motivated, and possess integrity. Little Scholars CDC, Inc. 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
- \_\_\_  **Will**  **Have** completed the required 45 hour DCF training including Emergent Literacy
- \_\_\_ 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

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

**Position Desired:**     Cook     Administration     Teacher (Circle: Infant, Toddler, Preschool, School Age)  
 Teacher Aide (Circle: Infant, Toddler, Preschool, School Age)

**Hourly Rate Desired:** \_\_\_\_\_    Are you seeking temporary or permanent work? \_\_\_\_\_

Hours Available:    Mon: \_\_\_\_\_    Tues: \_\_\_\_\_    Wed: \_\_\_\_\_    Thurs: \_\_\_\_\_    Fri: \_\_\_\_\_

#### 3 PERSONAL REFERENCES (do not list family or previous employers)

Name	Address	Phone Number	Relationship (ie. Coworker, friend)

**EDUCATIONAL EXPERIENCE**

High School Diploma or GED (Copy Required) \_\_\_\_\_

College/Degree or number of years completed/Major (Copy Required) \_\_\_\_\_

List courses completed or relevant childcare training (CPR, First Aid, FCCPC, CDA 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 & Phone:	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 career goals and objectives?

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2. Why should Little Scholars CDC, Inc. hire you?

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3. Define PROFESSIONAL CONDUCT. How does it apply to a child care program?

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4. Define CUSTOMER SERVICE and how it relates to a child care program?

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5. Describe your position on guidance as it relates to 2-year-old children arguing over a toy.

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6. Do you have any medical conditions that would affect your work performance? \_\_\_\_\_

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7. Have you been out of the country in the last 30 days?  NO  YES **OR** been diagnosed or in contact with someone who has/had COVID-19 in the past 30 days?  NO  YES Explain: \_\_\_\_\_

An application form sometimes makes it difficult to adequately summarize a complete background. Use the backpage 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.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Office Use Only:**

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