

# Amazing Creations Early Childhood Education Center

## Application for Employment (Application will be kept on file for 90 days)

Any seeking employment with this facility, who has been convicted of a crime listed in the child day care licensing law (Section 20-7-27 - et. Seq. SC Code of Laws, 1976, as amended) is guilty of a misdemeanor and, upon conviction, must be fined not more than five thousand dollars or imprisonment not more than one year, or both.

Date \_\_\_\_\_

Last Name	First Name	Middle Name	Social Security #
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Mailing Address	City	State	Zip
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Home Phone	Date Available to Work
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Are you at least 18 years old?	Yes _____ No _____
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Do you have a high school diploma or GED?	Yes _____ No _____
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Have you ever applied with us before?	Yes _____ No _____
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Type of Employment Desired	Full Time _____ Part Time _____ Temporary _____
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How did you learn about our organization?

### Education and Activities

Name of High School	City/State
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Name of College/University	City/State
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Diplomas, Certificates, or Degrees Obtained

Other Special Training (Name course, Date completed)

### Work Experience

Beginning with last employer

Company Name	From/To
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Company Phone	Position Held
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Company Supervisor	Wages
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Reason for Leaving

\_\_\_\_\_

Company Name	From/To
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Company Phone	Position Held
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Company Supervisor	Wages
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Reason for Leaving

\_\_\_\_\_

### Work Experience (Continued)

Company Name	From/To
Company Phone	Position Held
Company Supervisor	Wages
Reason for Leaving	

### Please check each type of work you would be willing to perform:

- |                                                              |                                               |
|--------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Pre-Kindergarten                    | <input type="checkbox"/> Bus Driver           |
| <input type="checkbox"/> Preschool (Ages 2-3)                | <input type="checkbox"/> Summer Camp          |
| <input type="checkbox"/> Nursery/Toddlers (Infants to Age 2) | <input type="checkbox"/> Cook                 |
| <input type="checkbox"/> After-School                        | <input type="checkbox"/> Housekeeping/Janitor |
| <input type="checkbox"/> Floater/Substitute Teacher          | <input type="checkbox"/> Other                |
- \_\_\_\_\_

### Please answer yes or no to the following questions:

Communicate effectively in the English (written and verbally)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Able to supervise, see, hear, and respond to children's needs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Able to crouch to child's eye level, sit on the floor, and stand?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Able to lift 30lbs from the floor to waist?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Able to move quickly to respond to a child's needs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Able to handle stress and tension that may occur?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you had a tuberculosis test within the last 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Date	Results

### Other Information

Please explain your reason for desiring employment with Amazing Creations.

Have you ever been convicted of a crime other than traffic violations? If so, please describe in full detail.

Do you have a valid Driver's License?

<input type="checkbox"/> Yes <input type="checkbox"/> No
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License #	State of Issue	Date of Expiration
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### Acknowledgement and Signature

I certify that the facts contained in this application are true and complete and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that my result from utilization of such information.

Applicant Signature	Date
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