



APPLICATION FOR EMPLOYMENT

Name

Last First Middle

Address

Street City State/Zip

Telephone Email

For background check purposes, please provide the following:

Social Security Number

Current County of Residence

Birthdate and Birthplace

EMPLOYMENT DESIRED

Position(s) Date you are available to start work

Willing to work **Full-time?** Yes No **Part-time?** Yes No **Substitute?** Yes No

Are you presently employed? Yes No If yes, may we contact your present employer? Yes No

EDUCATION

	Name and Location of School	Dates Attended	Degree(s) and/or Certification(s) Received
Elementary School			
High School			
Vocational School			
College			

EMPLOYMENT HISTORY List your last four employers, starting with the most recent.

Name and Address of Employer	Dates Employed	Phone Number	Your Position	Reason for Leaving

REFERENCES List three persons not related to you whom you have known at least six months, such as your pastor, teacher, coworker, etc.

Name	Organization, City, State	Phone Number	Relationship to You

REASON FOR APPLYING Why are you interested in working at SONshine Preschool?

AUTHORIZATION

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understood, and agree with the above statements.

Date _____ Signature _____