

Golden Acorn Academy

EMPLOYMENT APPLICATION

Golden Acorn Academy considers all applications without regard to an applicant's race, color, creed, religion, age, gender, national origin, pregnancy, veteran status and/or disability or other legally protected class.

NAME (first): _____ NAME (last): _____

NAME (middle): _____ NAME (maiden name if applicable): _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____

POSITION DESIRED: _____ DATE AVAILABLE: _____ DESIRED PAY: _____
(MUST PUT DOLLAR AMOUNT)

HOW DID YOU HEAR ABOUT US? _____

Please list your prior work starting with your most recent place of employment.

EMPLOYER NAME:	GENERAL JOB RESPONSIBILITIES:	
ADDRESS:		
TELEPHONE NUMBER:		
POSITION HELD:		DATES AND LENGTH EMPLOYED:
		RATE OF PAY:
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> Yes <input type="checkbox"/> No		
SUPERVISOR'S NAME:		

EMPLOYER NAME:	GENERAL JOB RESPONSIBILITIES:	
ADDRESS:		
TELEPHONE NUMBER:		
POSITION HELD:		DATES AND LENGTH EMPLOYED:
		RATE OF PAY:
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> Yes <input type="checkbox"/> No		
SUPERVISOR'S NAME:		

EMPLOYER NAME:	GENERAL JOB RESPONSIBILITIES:	
ADDRESS:		
TELEPHONE NUMBER:		
POSITION HELD:		DATES AND LENGTH EMPLOYED:
		RATE OF PAY:
REASON FOR LEAVING:		
MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> Yes <input type="checkbox"/> No		
SUPERVISOR'S NAME:		

Why have you chosen to work in Early Childhood Education? _____

EDUCATION:

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	NO. YEARS ATTENDED	DEGREE/ DIPLOMA
HIGH SCHOOL				
PROFESSIONAL CERTIFICATE				
UNDERGRADUATE COLLEGE/UNIVERSITY				
GRADUATE/ PROFESSIONAL DEGREE				
OTHER				

Please attach a copy of the Diploma/Certificate from your highest level of education achieved.

Please list any additional Educational/Specialized Training you have received related to the job for which you are applying:

Your possible employment will be conditional pending receipt of certified results of Criminal Background Check, Child Abuse Clearance and FBI Fingerprint Record. In order to action this state requirement, we will need your Social Security Number _____ and your drivers' license number _____.

Please answer the following questions with yes or no:

1. Are you at least 18 years of age and can you provide proof if required? _____
2. Are you a U.S. citizen or have appropriate documentation to show you are eligible to work in the U.S.? _____
(Proof of citizenship or immigration status will be required upon employment)
3. Please provide the hours that you are available to work between 6:30 a.m. and 6:30 p.m.? _____
If No, please indicate if there will be days or day parts that may be problematic for you. _____
5. Have you ever been convicted of or have an indicated report of any crime against a child? _____
6. Have you ever been convicted of any crime or have pending criminal actions against you including deferred adjudication? _____
If yes, please explain: _____

PERSONAL/PROFESSIONAL REFERENCES: Do not include family members.

NAME	PHONE NUMBER	RELATIONSHIP TO YOU	PROFESSION

APPLICANT'S STATEMENT:

I certify that the answers and information given herein are true, correct and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in termination regardless of when the information is discovered to be false or misleading.

PRINTED NAME _____

DATE _____

SIGNATURE _____

Thank you for your interest in being employed with Golden Acorn Academy of Allen. Upon review of completed applications, a representative of Golden Acorn Academy will schedule interviews with applicants who meet the initial requirements.