



# Right Start Childcare Center

49 William Street Campbellville  
rchildcarecenter@gmail.com /ph 592 660 1250



## Application for Employment

Thank you for your interest in employment at **Right Start Childcare Center**.  
We are an equal opportunity employer and will not discriminate on the bases of race, color, gender, national origin, age, religion, creed, or disability.

**General Information:** *Please print legibly or type.*

_____	_____	_____	_____
<i>Last Name</i>	<i>First Name</i>	<i>Middle</i>	<i>Tax Identification #</i>
_____	_____	_____	_____
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
_____	_____	_____	_____
<i>Home phone</i>	<i>Mobile Phone</i>	<i>Email Address</i>	<i>DOB</i>

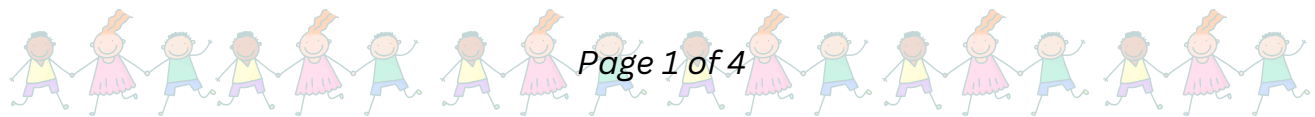
**Employment Desired:** *Please number the position(s) you are applying for in order of preference from 1 to 3 (if applicable).*

1. *Full Time*
2. *Part Time*
3. *Supply Assistant*

**I am available to work:** *(Please check)*

Full time   
  Part time   
  Weekends   
  Week days  
 Mornings   
  Afternoons   
  Nights   
  Temporary  
 Date Available \_\_\_\_\_   
 Compensation desired: \_\_\_\_\_

Are you 18 years of age or older? Yes/No



**Education/Training:** *Please print legibly or type.*

College/Trade School	Field of Study	Dates Attended	Degree/Certificate
College/Trade School	Field of Study	Dates Attended	Degree/Certificate
Other Education	Field of Study	Dates Attended	Degree/Certificate
High School	City, State	Dates Attended	Diploma
			Yes/No

Have you had CPR training? Yes/No List date of training \_\_\_\_\_

Have you had First Aid training? Yes/No List date of training \_\_\_\_\_

What other child care trainings have you had? (list details and dates)

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In addition to English, what other languages (if any) do you speak fluently?

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What skills and abilities do you possess that would be beneficial to Right Start Childcare Center?

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**Employment History:** *Please list most recent employer first.*

Employer Name	Dates of Employment	Street Address	City, State, Zip
Phone Number	Job Title	Supervisor Name	Reason for Leaving
Employer Name	Dates of Employment	Street Address	City, State, Zip
Phone Number	Job Title	Supervisor Name	Reason for Leaving
Employer Name	Dates of Employment	Street Address	City, State, Zip
Phone Number	Job Title	Supervisor Name	Reason for Leaving
Employer Name	Dates of Employment	Street Address	City, State, Zip
Phone Number	Job Title	Supervisor Name	Reason for Leaving

May we contact all previous employers? Yes/No

If no, please explain: \_\_\_\_\_



**References:** Please list at least two references that are not related to you. We will contact all references listed.

Name	Address	Phone	Years known
Name	Address	Phone	Years known
Name	Address	Phone	Years known

Do you have a criminal record? Yes/No

Please explain: \_\_\_\_\_

While employed in a childcare program have you ever been the subject of disciplinary action? Yes/No

If yes please explain: \_\_\_\_\_

**Acknowledgement:** Please read the following statement and sign below indicating your agreement.

I certify that the above information is true and correct and give authorization for investigation of all statements and information contained in this application. I consent to allow Right Start Childcare Center to check my references by contacting any persons listed in this application. I understand the reference questions may pertain to my personal or educational background, work experience, character and behavior. I understand my employment is subject to satisfactory verification of this information and agree that deliberate falsification of this document or significant omissions shall be grounds for disqualification of my application or dismissal from employment, if discovered at a later date. I pledge, if hired, to comply with the guidelines of conduct and policies and procedures of Right Start Childcare Center. I understand that employment may be subject to satisfactory completion of a physical examination, and Police background check.

This application will be kept on file for thirty days. If not contacted during that period of time, it may be necessary to complete another application to receive further employment consideration.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

