



TENDER YEARS CHILD DEVELOPMENT CENTER INC.
APPLICATION FOR EMPLOYMENT

Note: Please answer each question completely and accurately. No action can be taken on this application until all questions have been answered. Please print, except for your signature.

We do not discriminate on the basis of race, religion, national origin, color, sex, age, or handicap. It is our intention that all applicants be given equal opportunity and that selection decisions are based on job-related factors.

Position Applying for: _____ Date _____

Name: _____

Address: _____

Phone Number: _____ Social Security: _____

E-mail Address: _____

Were you ever employed here before? _____, if yes, when? _____

Have you ever applied here before? _____, if yes, when? _____

Have you ever been convicted of any crime against a child? If yes, Explain: _____

Has any founded report of child abuse or neglect 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: _____

Do you have State Police and Department of Welfare clearances? _____

Health: Do you have any physical limitations which would give you problems in performing this job? _____ if yes, Explain: _____

Would you take a physical examination, if required? _____

EDUCATION:

High School or GED: Name of school _____

Address of school _____

Highest grade completed _____

College or University: Name of school _____

Major _____ Degree _____

Advanced Degree or Coursework: _____

Additional Educational, Vocational, Technical Training Information:

REFERENCES:

1. Name: _____ Phone: _____

Address: _____

2. Name: _____ Phone: _____

Address: _____

3. Name: _____ Phone: _____

Address: _____

WORK HISTORY: (Continue on the back if you don't have enough room to list all your employers for the past ten years.)

EMPLOYERS NAME, ADDRESS, PHONE #	FROM/TO	DUTIES	SUPERVISOR	REASON FOR LEAVING
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1.

2.

3.

Are you now or do you expect to be engaged in any other business or employment? _____ If yes, explain: _____

If presently employed, may we contact your employer? _____ Explain any additional information (relative to name change, use of assumed name or nickname) necessary to enable us to check your work record. _____

NARRATIVE:

Why do you want to work in our program?

What do you feel best qualifies you for this job?

What is your basic philosophy for working with young children?

AFFIDAVIT:

I _____ certify that everything in this application is true and correct to the best of my knowledge. I understand that misleading or incorrect statements or consequential omissions may render this application void, or if employed, would be cause for termination. I authorize individuals or institutions named above to give any information regarding my employment, character and qualifications, hereby releasing them from all liability for issuing such information.

Signature _____ Date _____