



2525 East Villa Maria Road
Bryan, Texas 77802

Application for Employment

PERSONAL INFORMATION

Name	Social Security Number	Under 18? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Date of Birth	Date
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Local Address	City	State	Zip Code
Permanent Address	City	State	Zip Code

Home Phone Number	Mobile/Cell Number	Other Number	E-Mail Address
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Position Applied for	Expected Hourly Wage
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<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Substitute <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary <input type="checkbox"/> Other	Days Available to Work <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday Times Available to work?
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How did you hear about Bright Beginnings Pre-School? Why do you want to work at Bright Beginnings Pre-School?

Has anyone ever suggested or alleged that you are not appropriate to work with children? No Yes --If yes, please describe

Has Child Protective Services or a comparable entity ever investigated you about your appropriateness to work with children? No Yes --If yes, please explain

Have you ever been convicted of a felony? No Yes--If yes, please explain, including date, location, charge, and sentence.

Have you ever been convicted of any crime (misdemeanor or felony), or received a judgment related to child abuse, child neglect, and/or unlawful sexual offenses? No Yes--If yes, If yes, please explain, including date, location, charge, and sentence.

(Disclosure of criminal record will not necessarily disqualify you from employment.)

EDUCATION

High Scholl Attended & Location	Graduated? <input type="checkbox"/> No <input type="checkbox"/> Yes--If yes, year graduated?
College Attended Dates & Location	Major or Coursework Studied Degree or Certificate Received <input type="checkbox"/> No <input type="checkbox"/> Yes

First Aid Certification <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Completed	Expires
CPR Certification <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Completed	Expires
Pediatric CPR Certification <input type="checkbox"/> No <input type="checkbox"/> No	Date Completed	Expires
Other lifesaving or EMS training courses completed	Date Completed	Expires

EMPLOYMENT HISTORY (Include at least the past 5 years, attach additional sheet if necessary)

1	Company Name & Address	Dates of Employment	Name & Telephone Number of Supervisor	Starting Position & Rate Ending Position & Rate	Reason for Leaving?
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2	Company Name & Address	Dates of Employment	Name & Telephone Number of Supervisor	Starting Position & Rate Ending Position & Rate	Reason for Leaving?
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3	Company Name & Address	Dates of Employment	Name & Telephone Number of Supervisor	Starting Position & Rate Ending Position & Rate	Reason for Leaving?
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Have you ever been terminated from any position? <input type="checkbox"/> No <input type="checkbox"/> Yes----If yes, please explain.
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YOUTH / VOLUNTEER OR EDUCATION ACTIVITIES-- (If not listed in Employment History above)

1	Organization Name & Address	Dates of Commitment	Name & Telephone Number of Supervisor	Position & Responsibilities	Reason for Leaving?
2					

PERSONAL REFERENCES (Not listed as employment reference)

1	Name	Company	Title
	Relationship to Applicant	Telephone	Alternate Phone

2	Name	Company	Title
	Relationship to Applicant	Telephone	Alternate Phone

Have you ever been terminated from any position? No Yes----If yes, please explain.

PLEASE READ CAREFULLY

This application will remain active for one year. After one year, if you are still interested in employment, with Bright Beginnings Pre-School you will need to fill out a new application.

I hereby certify that the information and statements made in this application are true and correct, to the best of my knowledge. I understand that my misrepresentation or omission of facts in my application may be justification for refusal to hire, or termination of employment.

I understand that investigation into my character and reputation will be conducted prior to employment. I hereby authorize all past employers, volunteer contacts, organizations and references to supply relevant information about myself, and past work performances for use in determining my possible employment. By signing below, release the above entities from all liability in responding to inquiries concerning my application for employment.

I understand that if employment is established, it is not a contractual agreement and can be terminated at any time, with or without cause by myself or Bright Beginnings Pre-School.

I understand that I may be required to provide documentation for all certificates, transcripts, diplomas or other items listed in my application.

If employment is offered, I understand that I may be required to: take a physical examination (if the position requires), obtain an annual TB Test, obtain a food handlers card, or take a course for certification of First Aid and/or Pediatric CPR, at my own expense.

I understand that according to the Reform and Control Act of 1986, I will be required to provide documentation that establishes my identity and authorization to be employed in the United States.

By Signing below, I understand that if an employment relationship is established, my employment is “AT WILL” and can be terminated at any time with or without cause or notice, by either myself or Bright Beginnings Pre-School.

By signing I am stating that I understand all of the questions and statements made in this application, and if offered a position agree to follow the policies & procedures outlined in the Bright Beginnings Pre-School Employee Handbook.

Signature of Applicant	Date
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EARLY CHILDHOOD DEVELOPMENT

Applicant to Read & Complete Shaded Box Only

Applicant Name:	
I authorize all past employers, personal references, and volunteer organizations to provide Bright Beginnings Pre-School with relevant history or knowledge (favorable or unfavorable) concerning the decision for offer of employment. I am specifically waiving any other written notification needed for this quest. I hereby release Bright Beginnings Pre-School from all liability in responding to inquiries in connection with my application for employment.	
Applicant's Signature:	Date:

(To be completed by Bright Beginnings Pre-School)

Company, Organization or Personal Reference Name:	Telephone Numbers: Day () Evening ()
Supervisor/Contact Name:	Title:
Dates of Employment:	Position Title:
Beginning Wage:	Ending Wage:

(To be completed by Bright Beginnings Pre-School Representative or Applicant Reference)

How was the employee's attendance/ reliability /punctuality?
Work Habits?
Supervisor/Staff Relations?
Specific Duties?
Can you think of any reason to rule out this person to work with young children? <input type="checkbox"/> No <input type="checkbox"/> Yes--If yes, please explain.
Would you have concerns with this person being alone with a young child? <input type="checkbox"/> No <input type="checkbox"/> Yes--If yes, please explain.
Applicant's Strengths:
Applicant's Developmental Needs:
If employed or volunteer, Why did this person leave?
Would you rehire this person? <input type="checkbox"/> Yes <input type="checkbox"/> No--If no, please explain.
If you have young children, or when your children were young, would you feel/have felt comfortable leaving this person in charge of them? <input type="checkbox"/> Yes <input type="checkbox"/> No--If no, please explain.
Any other comments:
Reference Check Completed By: Date: