

Application for Employment Cougar Cub Daycare

Thank you for your interest in and application for employment with Cougar Cub Daycare. We are an equal opportunity employer and give employment and promotional consideration without regard to race, color, sex, religion, age or disability.

INSTRUCTIONS: It is important that you fill out all sections of this application completely & to the best of your ability. Your application will be used as part of the hiring process & therefore, should represent your best effort.

Current Information

Name _____
Last First Middle

Physical Address _____
City State Zip

Mailing Address _____
(If Different) City State Zip

Telephone _____
Home Cell

Email Address _____

General Information

Have you ever been convicted of any crime, other than a minor traffic incident, under the name you used on this application or under any other name? Yes No

If yes, please explain when, where & disposition of case.

Driver's License Information:

License Number _____ Class _____ Expiration Date _____

Are you legally authorized to work in the United States? Yes No

Availability

I am available to work: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday
 Mornings Afternoons Evenings

Date Available to Start _____

Are you at least 18 years of age? Yes No

Education

High School _____ Diploma/GED ____ Yes ____ No
City State

College _____ Years Attended _____
City State

Major Field of Study _____ Graduate ____ Yes ____ No

Other _____

Are you CPR Certified? ____ Yes ____ No If Yes, Date of Certification _____

Employment History (List most recent first; include any military service.)

Employer _____ Supervisor _____

Address _____ Telephone _____
City State Zip

Date of Employment: From _____ To _____ Job Title _____

Reason for Leaving _____

May we contact your employer/supervisor? ____ Yes ____ No

Comment _____

Employer _____ Supervisor _____

Address _____ Telephone _____
City State Zip

Date of Employment: From _____ To _____ Job Title _____

Reason for Leaving _____

May we contact your employer/supervisor? ____ Yes ____ No

Comment _____

Employer _____ Supervisor _____

Address _____ Telephone _____
City State Zip

Date of Employment: From _____ To _____ Job Title _____

Reason for Leaving _____

May we contact your employer/supervisor? ____ Yes ____ No

Comment _____

References

Please do not list family relatives. We recommend listing persons such as coworkers, teachers, parent of child/children who you have cared for in the past, etc., who have knowledge of your qualifications for the position for which you are applying. Cougar Cub Daycare will personally speak with each of your references, so we recommend that you let your references know to expect a call from us.

Name _____ City/State _____ Phone _____

Name _____ City/State _____ Phone _____

Name _____ City/State _____ Phone _____

PLEASE READ THE FOLLOWING STATEMENTS AND SIGN BELOW:

I certify that the above information is true and correct and give authorization for investigation of all statements and information contained in this application, my resume, other documents or verbally obtained during an employment interview. I voluntarily consent to allow Cougar Cub Daycare, Bird City Century II Development Foundation or any of their representatives check my references by contacting any persons or employer they deem to be an appropriate reference. 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 employment consideration disqualification or dismissal from employment, if discovered at a later date. I pledge, if hired, to comply with the guideline of conduct and company policies and procedures of Cougar Cub Daycare.

I understand that employment will require a criminal background check, and may be subject to satisfactory completion of a drug screening. CPR certification and specific vaccinations may be required.

SIGNATURE OF APPLICANT: _____ DATE: _____

Please fill out application in its entirety (attach resume or additional sheet of paper, if applicable) and mail to:

**Cougar Cub Daycare
PO Box 353
Bird City, KS 67731**