



APPLICATION FOR EMPLOYMENT

High Hopes Child Care Center is an equal opportunity employer and all qualified applicants will receive consideration. **High Hopes Child Care Center** does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the U.S? ☐ Yes ☐ No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)
☐ Yes ☐ No

Have you ever been terminated from employment or asked to resign by an employer? ☐ Yes
☐ No

If yes, please provide company names and details _____

EMPLOYMENT DESIRED

Position desired _____

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ☐ Yes ☐ No

Date you can start _____ Hourly rate/Salary desired _____

Can you work any shift? ☐ Yes ☐ No If no, explain: _____

Can you work overtime, including weekends? ☐ Yes ☐ No

Are you currently employed? ☐ If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? ☐ Walk In ☐ Advertisement ☐ Referral ☐ Other

Have you ever worked for this company before? ☐ Yes ☐ No Explain _____

Do you know anyone who works for our company? ☐ Yes ☐ No If yes, who? _____

If presently employed, why are you considering leaving?



EDUCATION

	Name and location of school	Degree Received	Subjects studied/Major
High School			
College or University			
Trade, Business or Correspondence School			

Have you completed any special courses, seminars and/or training directly related to the position for which you are applying? ___Yes ___No If yes, please describe:

Do you belong to any professional, trade, business or civic organizations that deal with the position for which you are applying? ___Yes ___No If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

EMPLOYMENT HISTORY

Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	



Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

REFERENCES

Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted



1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for **High Hopes Child Care Center** to hire me. If I am hired, I understand that I will be employed on an at-will basis and either **High Hopes Child Care Center** or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of **High Hopes Child Care Center** has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to **High Hopes Child Care Center** true and complete information on this application. No requested information has been concealed. I authorize **High Hopes Child Care Center** to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this can result in disqualification for employment consideration or, if hired, may be grounds for immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.

RESULTS

Employed: YES [] NO []

If Yes, Job Title: _____ Department _____

Date beginning Employment _____ Compensation \$ _____ per _____

Interviewed by: _____ Date: _____



Fair Credit Reporting Act Disclosure Statement

By this document, **High Hopes Child Care Center** discloses to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and at any time during your employment. Should an investigative consumer report be requested, you will have the right to request a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to acknowledge the receipt of this disclosure.

Signature

Date

Printed Name



**FCRA Authorization to Obtain a Consumer Report
(Background/Credit Check)**

Pursuant to the federal Fair Credit Reporting Act, I hereby authorize **High Hopes Child Care Center** and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; credit history and reports; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records.

I, _____, authorize the complete release of these records or data pertaining to me that an individual, company, firm, corporation or public agency may have. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish **High Hopes Child Care Center** or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I understand that, pursuant to the federal Fair Credit Reporting Act, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

Print Name

Date of Birth

Driver's License Number

State of License

Signature

Date



CONSENT FOR PRE-EMPLOYMENT, RANDOM, OR REASONABLE SUSPICION DRUG TEST SCREEN AND RELEASE COVENANT NOT TO SUE AND INDEMNITY AGREEMENT

I hereby CONSENT to allow (medical center) to take a specimen of my hair, urine, or blood and submit it for a pre-employment, random, or reasonable suspicion drug test screen. I FURTHER CONSENT to allow the laboratory testing service to make the results of such screen available to the prospective or current employer, **High Hopes Child Care Center**.

In consideration for such services being rendered on my behalf, I hereby RELEASE the laboratory testing service, its officers, agents, and employees, from any and all claims which I might otherwise have due to such results being made so available. I hereby CONSENT NOT TO FILE ANY ACTION at law or in equity against **High Hopes Child Care Center**, the laboratory testing service, their respective officers, agents or employees in connection with the results of such screen being made so available, and I hereby agree to INDEMNIFY and SAVE HARMLESS **High Hopes Child Care Center**, the laboratory testing service, their respective officers, agents, and employees from all damages, expenses, reasonable attorney's fees, and costs of court which they or any of them may suffer or incur, jointly or severally, due to the results of such screen being made so available.

Signature

Date

Printed Name