

## **Employment Application**

Carroll Child Care and Learning Center is an equal opportunity employer and considers all applications for employment without regards to race, color, religion, ancestry or natural origin, sex, age, marital status, sexual orientation, disability, veteran status or any other legally protected status. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodations in the application process, he or she should contact a company representative.

		Арр	olicant Ir	nforma	ition			
Full Name:							Date:	
	Last	First	!			M.I.		
Address:								
	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
Phone:			E	Email				
Date Availab	le: So	cial Securit	y No.:			Desire	d Salary: <u>\$</u>	
Position App	lied for:							
Are you a cit	izen of the United States?	YES	NO	If no	o, are you	u authorized to v	YES work in the U.S.?	NO
Have you eve	er worked for this company?	YES	NO	If yes,	when?_			
Have you ev	er been convicted of a felony?	YES	NO					
If yes, explain	n:							
			Educa	ation				
High School:			Address:_					
From:	To:	Did you g	raduate?	YES	NO	Diploma:		
College:			Address:_					
From:	To:	Did vou c	ıraduate?	YES	NO	Degree:		

	Refe	rences				
Full Name:		Relationship:				
Company:			Phone:			
Full Name:				Relationship:		
Company:				Phone:		
Full Name:				Relationship:		
Company:				Phone:		
	Previous I	Employme	nt			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting	Salary: <u>\$</u>		Ending Salary:		
Responsibilities:						
From:	To:	Reason	Reason for Leaving:			
May we contact your p	previous supervisor for a reference?	YES	NO			
Company				Phone		
A d due e e .			_	Phone:		
				Supervisor:		
Job Title:	Starting	Salary: <u>\$</u>		Ending Salary: <u>\$</u>		
Responsibilities:						
From:	To:	Reason	for Leaving:_			
May we contact your p	previous supervisor for a reference?	YES	NO			
Company						
Address:				Supervisor:		
Job Title:	Starting	Starting Salary: <b>\$</b>				
Responsibilities:						
From:	To:	Reason	for Leaving:_			
May we contact your p	previous supervisor for a reference?	YES	NO			

Military Service
nch: From: To:
nk at Discharge: Type of Discharge:
ther than honorable, explain:
AT – WILL Employment
e relationship between you and Carroll Child Care and Learning Center is referred to as "employment at will". This means tha ir employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or Carrol ild Care and Learning Center
representative of Carroll Child Care and Learning Center has authority to enter into any agreement contrary to the foregoing aployment at will" relationship. You understand that your employment is "at will", and that you acknowledge that no oral of the statement or representations regarding your employment can alter your at-will employment status, except for a written tement signed by you and either our Executive Director/Board Chair.
Disclaimer and Signature
I understand that as a condition of any offer of employment, I am required by federal law to produce documentary evidence of my identity and authorization to work in the United States and that this documentation must be submitted to CCCLC within three calendar days from my first day of work. Failure to produce this information within three calendar days will result in the termination of my employment. This process is known as the I-9 process.
If I am hired, I understand CCCLC retains, consistent with applicable law, all rights and privileges to hire, transfer, terminate and adjust staffing as deemed in its best interest.
I understand that any offer of employment is contingent on my passing a criminal background check; receipt of satisfactory references; and my ability to produce the required I-9 documentation.
I understand that if hired, my employment with CCCLC is an at-will relationship and that employment can be terminated at any time by either party; that if I have any legal issue with the Company I must file all charges within a six month statute of limitations; upon leaving employment. I will not make any disparaging comments concerning the company and I will maintain confidentiality pertaining to all company information.
knowledge that I reviewed Paragraphs 1-4 above. I certify that my answers are true and complete to the best of my knowledge inderstand that any false answers, statements, omissions or misrepresentation made by me on this employment application will sufficient grounds to either rescind an offer of employment or terminate my employment with CCCLC; any employment offe de to me is contingent upon verification of the information I have provided on this employment application.
Inder Department of Labor regulations, an employer may not require or demand as a contingent of employment, rospective employment, or continued employment, that an individual submit to or take a Lie Detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not to exceed \$100.

Signature: \_\_\_\_\_ Date:\_\_\_\_\_