



**Little Kelli's Playhouse
Employment Application**

We at Little Kelli's Playhouse do not discriminate on the basis of sex, race, religion, national origin, marital status, age, weight, height, color, or handicap in the hiring, promoting, payment or discipline of employees.

Personal Information:

Name: _____

Address: _____

City, State, Zip: _____

Phone #: (____) _____ Alt Phone #: (____) _____

E-mail: _____

Social Security # _____

- I am 18 years of age or older
- I am not 18; my birth date is _____

I am applying for the position of _____

- Full Time
- Part-Time
- Substitute

Please list the days and times you are available for work:

Monday: ____ to ____ Tuesday: ____ to ____ Wednesday: ____ to ____

Thursday: ____ to ____ Friday: ____ to ____

Minimum acceptable hourly rate of pay: \$ _____

When could you begin work? _____

Hobbies, Interest, Recreational Activities:

Person to notify in case of emergency:

Name: _____

Address: _____

City, State, Zip: _____

Phone #: (____) _____ Alt Phone #: (____) _____

Education:

High School

Name: _____

City/State: _____

Date attended: _____

Date Degree Granted: _____

College

Name: _____

City/State: _____

Date attended: _____

Major: _____

Minor: _____

Date Degree Granted: _____

Name: _____

City/State: _____

Date attended: _____

Major: _____

Minor: _____

Date Degree Granted: _____

Professional/Educational Organizations: _____

CPR & First Aide Trained Expires on: _____

Date of last Physical: _____

Date of last negative TB : _____

Are you planning to further your education? Yes No

If yes, please explain:

Employment History:

Company Name: _____

Address: _____ Phone() _____

Your position: _____

Work duties: _____

Supervisors Name: _____

Dates of employment: _____ to _____

Salary/wage: _____

Reason for leaving: _____

Company Name: _____

Address: _____ Phone() _____

Your position: _____

Work duties: _____

Supervisors Name: _____

Dates of employment: _____ to _____

Salary/wage: _____

Reason for leaving: _____

Company Name: _____

Address: _____ Phone() _____

Your position: _____

Work duties: _____

Supervisors Name: _____

Dates of employment: _____ to _____

Salary/wage: _____

Reason for leaving: _____

References:

Please list three references. Please do not include relatives, or former supervisors.

Name: _____

Address: _____

Phone (____)_____Alt Phone(____)_____

Relationship to you (friend, co-worker etc): _____

Best available time to reach _____

Name: _____

Address: _____

Phone (____)_____Alt Phone(____)_____

Relationship to you (friend, co-worker etc): _____

Best available time to reach _____

Name: _____

Address: _____

Phone (____)_____Alt Phone(____)_____

Relationship to you (friend, co-worker etc): _____

Best available time to reach _____

Have you ever been convicted of a crime? Yes No

Have you ever been convicted of any crime that deals with the abuse or neglect of children? Yes No

Have you ever been convicted of a crime that led to determination of employment? Yes No

May we do a criminal record check? Yes No

If yes, please provide us with a copy of your driver's license.

Do you have any impairment in

- Hearing
- Vision
- Speech

Which would prevent you from engaging in normal activities necessary to care for young children?

Are there any other physical or personal limitations about the type of work you can do with children, or the amount of time you can spend at work? If yes, please explain.

Teaching:

Special Talents:

Please list any qualities that you have that can benefit the life of a child and this daycare facility:

Please list any experience you have working with children:

What would you do if you were reading a story, and some of the children began to lose interest?

One child bit or hit another child in the classroom. What would you do?:

What is your philosophy on children's discipline?

I give Little Kelli's Playhouse permission to contact all references listed above

Signature

Date

I understand that any dishonest answer given on this application or with any future interview, would be considerable grounds for dismissal. I also agree to the release of this application or a portion of its representatives of the Department of Social Services, or other government agencies.

Signature

Date

This application will be considered current for six months. Any thing over six months will require another application completed for reconsideration of employment.

Return this form to:

Little Kelli's Playhouse
1150 W. Draher Rd.
Oxford, Mi 48371
Phone: 248-969-1362
Fax: 248-969-2784
www.littlekellisplayhouse.com