P.O. Box 123Covesville, VA 22931

#### **EMPLOYMENT APPLICATION**

Please answer the questions on this Employment Application form as completely and accurately as possible so that your Application may be evaluated properly.

Covesville Child Development Center (CCDC) is an Equal Opportunity Employer. We consider all candidates for employment regardless of race, color, religion, national origin, sex, age, handicap, veteran status or any other basis prohibited by Federal or State laws, and the information requested on this application will not be used for any purpose prohibited by law.

#### **PERSONAL DATA**

| Name  |                      |                     | Date of Applicat   | tion  |
|---|----------------------|---------------------|--------------------|---|
| Last  | First                | Middle              |                    |   |
| Present Address   |                      |                     |                    |   |
|   | Street or RFD        | City                | State              | Zip Code  |
| Phone No  |                      |                     |                    |   |
| Social Security Num   | ber P                | osition Desired     | Des                | sired Wage  |
| Position(s) Applied _   |                      |                     |                    |   |
| Have you ever applice Your position?                                    | •                    | loyed by CCDC? If   | yes, when?         |   |
| Are you at least 18 y   | ears of age? If no   | t, state your age   |                    |   |
| Are you a U.S. citizer<br>the United States? N<br>presentation of the o | 'es No (A            | ny offer of employr | ment is contingent | •   |
| Have you ever been criminal record does                                 |                      |                     |                    | •   |
| please explain and ir   | ndicate what can b   | e done to reasonal  | oly accommodate y  | Yes No If no, your situation in order nation on an attached |
|   | ld interfere with yo | •                   | , ,                | this Center. Is there<br>y if you are offered a             |

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| When will you    | he able to | start working? |
|------------------|------------|----------------|
| Willell Will you | DC abic to | start working: |

#### **EDUCATION**

| Type of         | Name of                 | Location             | Graduated          | Degree | Major |
|-----------------|-------------------------|----------------------|--------------------|--------|-------|
| School          | School                  |                      | Yes/No             |        |       |
| High School     |                         |                      |                    |        |       |
| Technical       |                         |                      |                    |        |       |
| School          |                         |                      |                    |        |       |
|                 |                         |                      |                    |        |       |
| College         |                         |                      |                    |        |       |
|                 |                         |                      |                    |        |       |
| Special Trainir | ng or Skills? (i.e. use | a personal computer, | art courses, etc.) |        |       |
| •               | ,                       |                      | ,                  |        |       |
|                 |                         |                      |                    |        |       |

### **EMPLOYMENT HISTORY**

(START WITH MOST RECENT POSITION)

| 1. | Name of Center   |  | _ Address         |              |              |       |  |
|----|--|--|-------------------|--------------|--------------|-------|--|
|    | Type of Business   | _ Dates Employed: From To                                |                   |              |              |       |  |
|    | Your Position When Starting                              |  | Starting Pay Rate |              | Rate         |       |  |
|    | Your Position When Leavin                                |  |                   |              |              |       |  |
|    | Description of Duties                                    |  |                   |              |              |       |  |
|    | Reasons for Leaving                                      |  |                   |              |              |       |  |
|    | Name, Address, Telephone                                 | Name, Address, Telephone Number and Title of Supervisor: |                   |              |              |       |  |
|    |  |  |                   |              |              | _     |  |
|    | Name   | Address  |                   | Pho          | one          | Title |  |
|    |  |  |                   |              |              |       |  |
| 2. | Name of Center   |  |                   |              |              |       |  |
|    | Type of Business   |  |                   |              |              |       |  |
|    | Your Position When Startin                               | g  |                   |              | Starting Pay | Rate  |  |
|    | Your Position When Leavin                                |  | Final Pay Rate    |              |              |       |  |
|    | Description of Duties                                    |  |                   |              |              |       |  |
|    | Reasons for Leaving                                      |  |                   |              |              |       |  |
|    | Name, Address, Telephone Number and Title of Supervisor: |  |                   |              |              |       |  |
|    |  |  |                   |              |              | _     |  |
|    | Name   | Address  |                   | Pł           | none         | Title |  |
|    |  |  |                   |              |              |       |  |
| 3. | Name of Center   |  | Address           |              |              |       |  |
|    | Type of Business   |  | D                 | ates Employe | ed: From     | To    |  |

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|            | Your Position When Sta   | rting   | Starting Pay Rate   | <u> </u> |
|------------|--|---|---|----------|
|            |  | aving   |   |          |
|            | Description of Duties _  |   |   | _        |
|            | Reasons for Leaving  |   |   | _        |
|            | Name, Address, Teleph  | one Number and Title of Super   | visor:  |          |
|            | Name   | Address   | Phone   | Title    |
| <u></u>    | Name of Center   | Address   |   | _        |
|            | Type of Business   | [   | Dates Employed: From To   |          |
|            |  | rting   |   |          |
|            | Your Position When Lea   | aving   | Final Pay Rate  |          |
|            | Description of Duties _  |   |   | _        |
|            |  |   |   | _        |
|            | heasons for Leaving  |   |   |          |
|            | 9  | one Number and Title of Super   | VISOr:  |          |
| <u> </u>   | Name, Address, Teleph Name  May we contact your pre  | Address  esent employer? Yes No evious employers? Yes No  | Phone   | Title    |
|            | Name, Address, Teleph Name  May we contact your pre  | Address esent employer? Yes No  | Phone   | Title    |
| >          | Name, Address, Teleph Name  Name  May we contact your pre May we contact your pre  | Address esent employer? Yes No evious employers? Yes No OYMENT PERFORMAI  | Phone  NCE HISTORY  | Title    |
| >          | Name, Address, Teleph Name  Name  May we contact your pre May we contact your pre  | Address esent employer? Yes No evious employers? Yes No   | Phone  NCE HISTORY  | Title    |
| Hav        | Name, Address, Teleph  Name  May we contact your pre May we contact your pre  May we contact your pre  EMPLO  ye you ever been disciplings NO  | Address esent employer? Yes No evious employers? Yes No  OYMENT PERFORMAI  ed or discharged by an employ  | Phone  NCE HISTORY  er for any of the following:                            | Title    |
| Hav        | Name, Address, Teleph Name  Name  May we contact your pre May we contact your pre May we contact your pre  EMPLO  ve you ever been discipling NO Absenteeism, tardi  | Address  esent employer? Yes No evious employers? Yes No  OYMENT PERFORMAL ed or discharged by an employ ness or failure to notify employ   | Phone   NCE HISTORY  er for any of the following:  er regarding an absence? | Title    |
| Hav<br>YES | Name, Address, Teleph Name  Name  May we contact your pre  EMPLO  Ve you ever been discipling NO  Absenteeism, tardi Theft, unauthorized               | Address esent employer? Yes No evious employers? Yes No  OYMENT PERFORMAL ed or discharged by an employ ness or failure to notify employ d removal of employer's proper                     | Phone   NCE HISTORY  er for any of the following:  er regarding an absence? | Title    |
| Hav<br>YES | Name, Address, Teleph Name  Name  May we contact your pre May we contact your pre May we contact your pre  EMPLO  Ve you ever been disciplin  NO  Absenteeism, tardi Theft, unauthorized Fighting, assault or                  | Address esent employer? Yes No evious employers? Yes No  OYMENT PERFORMAL ed or discharged by an employ ness or failure to notify employ d removal of employer's proper                     | Phone   NCE HISTORY  er for any of the following:  er regarding an absence? | Title    |
| Hav<br>YES | Name, Address, Teleph  Name  Name  May we contact your pre May we contact your pre May we contact your pre  EMPLO  Ye you ever been discipling NO Absenteeism, tardi Theft, unauthorized Fighting, assault on Insubordination? | Address  esent employer? Yes No evious employers? Yes No  DYMENT PERFORMAI  ed or discharged by an employ ness or failure to notify employ d removal of employer's proper related offenses? | Phone   NCE HISTORY  er for any of the following:  er regarding an absence? | Title    |
| Hav<br>YES | Name, Address, Teleph Name  Name  May we contact your pre May we contact your pre May we contact your pre  EMPLO  Ve you ever been disciplin  NO  Absenteeism, tardi Theft, unauthorized Fighting, assault or                  | Address  esent employer? Yes No evious employers? Yes No  OYMENT PERFORMAL  ed or discharged by an employ ness or failure to notify employ d removal of employer's proper related offenses? | Phone   NCE HISTORY  er for any of the following:  er regarding an absence? | Title    |

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# APPLICANT'S AGREEMENT AND CERTIFICATION (PLEASE READ THE FOLLOWING CAREFULLY AND SIGN)

I hereby certify that the facts set forth in this employment application (and accompanying resume, if any) are true and complete to the best of my knowledge, and I agree and understand that any misrepresentation or falsification of information or failure to disclose information during the employment application process may disqualify me from future consideration of employment and if employed, will subject me to discharge. I have not knowingly withheld any fact or circumstance that could, if disclosed, affect my application unfavorably. I further certify that I am a true and bona fide job applicant, sincerely interested in working in the position(s) for which I have applied, and am seeking employment with CCDC to provide me with the benefits of a job and for no other purpose.

I agree and understand that CCDC and its agents may investigate or seek information concerning my background and/or previous employment, whether of record or not. Accordingly, I hereby authorize the previous employers and references listed in my application, or any other source contacted by CCDC to give the Center any and all information concerning my previous employment, or any other information they may have, personal or otherwise. I hereby release CCDC and its agents, and previous employers, and any other persons or entities whatsoever involved in such an investigation or inquiry from all liability of any kind, including damages on account of furnishing such information.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with CCDC is of an "at will" nature, which means that I may resign at any time and the Center may discharge me at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any documentation or by conduct unless such change is specifically acknowledged in writing by the President of CCDC.

If employed, I will not engage in any action or outside employment or activity that would involve a perceived conflict of interest with CCDC's mission or reflect adversely on CCDC's employees, its operations or its image in the community.

ADDITIONALLY, I HEREBY ATTEST UNDER PENALTY OF PERJURY THAT I AM AUTHORIZED TO WORK IN THE

| UNITED STATES. |                        |
|----------------|------------------------|
|                |                        |
|                |                        |
|                |                        |
| Date           | Signature of Applicant |