



Building Bridges Child Development Center

Application for Employment

Applicants Information

Date of application: _____

Name: _____

Home address: _____ Home phone: _____

Cell phone: _____ SS#: _____ Email address: _____

Emergency Contact

Name: _____ Phone: _____

Cell phone: _____ Relationship: _____

Interest Information

Position applying for: _____ Circle one: Full-time Part-time Substitute

Hours available: _____ When can you start work: _____ (Salary begins at minimum wage)

Experience

Have you worked in a childcare setting previously? _____ If yes, where? _____

Was it a positive experience? Please explain

How did you hear about Building Bridges and why did you choose to apply for a position here?

Have you applied for a position with Building Bridges previously? If yes provide date: _____

Do you have reliable transportation? _____ How is your driving record? _____

Have you ever been convicted of or are subject to pending charges for any felony in the past five year prior to the application date?

Do you have any health issues that would affect your job performance? If yes explain

List relevant qualifications, volunteer activities, or organizations to which you belong?

May we contact your current employer for a reference? _____

Education

Type of school	Name	Location	Diploma or Degree	Date
High school				
Technical College				
College/ University Undergraduate				
Graduate school				

Work Experience

(List most recent employer first)

Employer name/ address	Type or work / duties	Date employed

Applicants References

Please list at least two references who have had firsthand personal and professional knowledge of you.

Name: _____ Cell phone: _____
Address: _____ Home phone: _____
Relationship to applicant: _____

Name: _____ Cell phone: _____
Address: _____ Home phone: _____
Relationship to applicant: _____

I have completed this application truthfully and to the best of my ability. I understand that if any information I provided is found to be false, I will be ineligible for employment. I authorize investigation of all statements contained herein. Parties that are listed above that provide references are released from liability for any damage that may result from furnishing information. I understand that if hired, my employment is not for a definite period of time and hours will not be guaranteed to any employee. Employees are granted hours according to the requirements under the Virginia Department of Social Services.

Signature: _____ Date: _____

BBCDC -Office Use Only

Position History

Hire Date _____

<u>Date</u>	<u>Position</u>	<u>Classroom</u>

Employee Name: _____

Reference 1 Information

Name _____ Phone _____

How do you know this person: _____?

How long have you know this person _____? Responsible _____? Reliable _____?

Describe personality _____.

Would you recommend this person to work with children _____?

Additional Information to add _____.

Reference Checked by: _____ Date _____

Reference 2 Information

Name _____ Phone _____

How do you know this person: _____?

How long have you know this person _____? Responsible _____? Reliable _____?

Describe personality _____.

Would you recommend this person to work with children _____?

Additional Information to add _____.

Reference Checked by: _____ Date _____

Departure Information

Last date of employment: _____ Two week notice: Yes or No

Reason employee gave notice _____

Eligible for rehire _____

Date Terminated: _____

Reason for termination: _____

Administration / Date