

## Application for Employment

Smart Beginnings Early Learning Center, is an Equal Opportunity Employer committed to excellence. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

**PLEASE TYPE OR PRINT.** Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Position Applying For:	Name (Last, First, Middle):	Social Security Number:
JOB #:		
Street Address:		City, State & Zip:
Birthdate:	Cell Phone:	Email Address:
Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	HAS THIS INDIVIDUAL LIVED IN ANY OTHER STATE(S) BESIDES MISSOURI WITHIN THE PAST 5 YEARS? YES/NO  IF YES, PLEASE LIST OTHER STATE(S).
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, what is your current age?
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, what is your current job title & department?
Are you related to any current Smart Beginnings Early Learning Center employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, their name & their relationship to you?
Have you ever been employed by Smart Beginnings Early Learning Center?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, dates of employment & reason for leaving:
How did you learn about this employment opportunity at Smart Beginnings Early Learning Center? Check all that apply: <input type="checkbox"/> Ad in <i>newspaper</i> <input type="checkbox"/> Job Bulletin (Posting) /Walk-in    Website <input type="checkbox"/> Dept. of Labor <input type="checkbox"/> Ad in <i>magazine</i> <input type="checkbox"/> Referral by employee    Other: _____		

### EDUCATION

Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of Graduation	Degree received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.						

\*Office Use Only: Hire Date: \_\_\_\_\_ Leave Date: \_\_\_\_\_ Reason? \_\_\_\_\_

**SKILLS:** Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)


**WORK EXPERIENCE-**Please detail your work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Attach additional sheets if necessary. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments.

**PLEASE DO NOT** complete this information with the notation "See Resume."

**PLEASE NOTE:** Smart Beginnings Early Learning Center, Inc. reserves the right to contact all current and former employers for reference information.

Dates Employed (most recent position) From: _____ To: _____	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time  If part-time, # hrs./wk: <input type="checkbox"/>	Title: _____
Starting Salary: _____	Organization Name: _____	
Final Salary: _____		
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: <input type="checkbox"/> At any time  <input type="checkbox"/> Only if I am a finalist candidate
Primary duties:		Reason for Leaving:

Dates Employed (most recent position) From: _____ To: _____	<input type="checkbox"/> Full time <input type="checkbox"/> Part-time  If part-time, # hrs./wk: <input type="checkbox"/>	Title: _____
Starting Salary: _____	Organization Name: _____	
Final Salary: _____		
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate
Primary duties:		Reason for Leaving:

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