

If you need additional space, use back of application or attached a supplemental sheet

No person shall be denied employment on the basis of any legally prohibited discrimination involving, but not limited to, race, color, creed, religion, national or ethnic origin, sex, sexual orientation, age or handicap. Employment is contingent upon furnishing evidence of identity and employment eligibility.

GENERAL INFORMATION								
Full Name:				Current Address:				
Email:			Pi	HONE NUMBER: Home Cell	Work	(Select O	nel	
Are you legally eligible to work in the United States? (proof of citizenship or immigration status will be required upon employment)						YE	-	NO
Are you 18 years of	age or older?					YE	S	NO
If not 18 years of ag	e or older, can ya	ou supply working p	apers?			YES	S	NO
violations? A crimine Seriousness and nature	Have you ever been convicted of any criminal offense other than minor traffic YES NO violations? A criminal conviction will be considered only in relation to the job for which you are applying. Seriousness and nature of the offense, time elapsed and rehabilitation will be taken into account. NO PERSON MAY BE A STAFF MEMBER OF A DAYCARE CENTER WHO HAS BEEN CONVITED OF A CRIME AGAINST CHILDREN						NO	
Do you have an ind	icated report of a	child abuse, maltrec	atment or ne	eglect?		YES		NO
		Sour	CE OF	REFERRAL				
Self	School	State Employment Cor Office		Community Agency	Recr	Recruited by IC3 Other		Other:
		TYPE OF	Positi	ON DESIRED	1		I	
Teacher Classroom Assistant/ Administration/Supervisor Counselor			or		pport Services cleaning, maintenance)			
Please Specify:								
DATE AVAILABLE: HOURLY WAGE DESIRED: ARE YOU SEEKING: SPEC			Speci	CIFY DESIRED PERIOD OF WORK AND/ OR HOURS PER DAY:				
/ / \$ Full-Time Part-Time Temp.								
Please describe your specific job interests which pertain to employment at IC3								

EMPLOYMENT RECORD (List most recent employment first and attach resume if available)						
Start Date End Date Employer Name & Address Final Position Title					tion Title	
Start Salary	End Salary	Last Supervisor's Name Phone Initial Position 1			ition Title	
Position Description		Reason For Leaving		May we contac YES	t this employer	

Start Date	End Date	Employer Name & Address		Final Position Title
Start Salary	End Salary	Last Supervisor's Name	Phone	Initial Position Title
Position Description		Reason For Leaving		May we contact this employer
				yes no

Start Date	End Date	Employer Name & Address		Final Position Title
Start Salary	End Salary	Last Supervisor's Name	Phone	Initial Position Title
Position Description		Reason For Leaving		May we contact this employer
				yes no

Start Date	End Date	Employer Name & Address		Final Position Title
Start Salary	End Salary	Last Supervisor's Name	Phone	Initial Position Title
Position Description		Reason For Leaving		May we contact this employer
				yes no

Start Date	End Date	Employer Name & Address		Final Position Title	
Start Salary	End Salary	Last Supervisor's Name	Phone	Initial Position Title	
Position Description		Reason For Leaving		May we contact this employer	
				yes no	

Education and Training						
College University or Technical Social	Type of Degree of Diploma Years Attended		Major Area of Study			
Graduated YES NO	Name of School		City	State		
College University or Technical Social	Type of Degree of Diploma Years Attended		Major Area of Study			
Graduated YES NO	Name of School		City	State		
High School	Type of Degree of Diploma Years Attended		Major Area of Study			
Graduated YES NO	Name of School	I	City	State		
Other	Type of Degree of Diploma Years Attended		Major Are	a of Study		
Graduated YES NO	Name of School		City	State		

List other skills and training you consider relevant to employment at Ithaca Community Childcare Center

List any professional organizations, associations, honors, certifications, professional licenses and publications you consider significant. Please indicate the professional license number and state of issuance

Professional References

List 3 persons, other than relatives or personal triends, who have knowledge of your work and/or Education					
	Reference 1	Reference 2	Reference 3		
Name					
Phone					
Email Address					

STATEMENT

I herby authorize investigation of all statements in this application including references. I certify that such statements are true and understand that misrepresentation or omission of facts called for in this form is cause for termination of employment without notice. I also agree, if employed , to abide by all regulations of Ithaca Community Childcare Center.

Signature:

Mailing Address

Date:

QUESTIONNAIRE					
Name:	Date:				
What attracted you to	our Center?				
What age group(s) would you prefer to w 1 = most preferred4			apply)		
Infants (8 weeks - 18 months)	1	2	3	4	
Toddlers (18 months - 3 years)	1	2	3	4	
Pre-K (3 years - 5 years)	1	2	3	4	
School Age (K - 5th grade)	1	2	3	4	
What are your expectations	/goals for this	job?			
Do you have any particular skills or talents	that you'd lik	e to utilize (nt IC32		
Such as music, dance, arts, langua					
Have you worked with children before?			YES	NO	
If YES, please answer questions below:					
Briefly describe your experience. (Setting, situation, etc.)					
What did you enjoy about this experience?					
What did you find most difficult about this experience?					
What age children have you worked with?					
Is there anything else you w	ould like to a	dd?			

What hours are you available? IC3's hours of operation are 7:30am—5:30pm				
Mondays:				
Tuesdays:				
Wednesday:				
Thursdays:				
Fridays:				

