



EMPLOYMENT APPLICATION

PERSONAL INFORMATION

(Note: All Parts of Application must be filled out, write N/A if Question is not applicable)

Taylor's Tots Preschool Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants for any reason. Including but not limited to race, color, national origin, ancestry, gender, medical condition, pregnancy, religion, sex, sexual orientation, age, veteran status, marital status disability, genetic information, lifestyle, or any other basis prohibited by law.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

E-Mail: _____

Position desired: _____

When would you be able to begin work: _____

Have you ever worked at Taylor's Tots Preschool before: YES NO

If Yes, when; give dates and location(s): _____

Do you know of any relatives employed here*: YES NO

If Yes, name and relation of each: _____

*** if at any time during your employment your answer change yes, please inform Management.**

EDUCATION

(Note: All Parts of Application must be filled out, write N/A if Question is not applicable)

	School Name, City, State	Diploma or Degree
High School		<input type="checkbox"/> YES <input type="checkbox"/> NO
College or University		<input type="checkbox"/> YES <input type="checkbox"/> NO
Type Licenses or Certifications		<input type="checkbox"/> YES <input type="checkbox"/> NO
Other Training		<input type="checkbox"/> YES <input type="checkbox"/> NO



EMPLOYMENT HISTORY

(Note: All Parts of Application must be filled out, write N/A if Question is not applicable)

Are you presently employed? YES NO
 If Yes, may we contact your employer? YES NO

Why are you leaving? _____

Start list with your present or most recent employer
 (1)

Name of Employer	Telephone Number ()
Supervisor's Name and Title	Dates Employed From: To:
Address (City, State, Zip Code)	Rate of Pay per hour Beginning \$ _____ Final \$ _____
Describe Work Performed: _____ _____	

(2)

Name of Employer	Telephone Number ()
Supervisor's Name and Title	Dates Employed From: To:
Address (City, State, Zip Code)	Rate of Pay per hour Beginning \$ _____ Final \$ _____
Describe Work Performed: _____ _____	

(3)

Name of Employer	Telephone Number ()
Supervisor's Name and Title	Dates Employed From: To:
Address (City, State, Zip Code)	Rate of Pay per hour Beginning \$ _____ Final \$ _____
Describe Work Performed: _____ _____	

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