

Criminal History

Have you ever been convicted of a crime? Yes No

If yes, please explain: _____

Transportation

Do you have a driver's license? Yes No

ID Number: _____ State: _____ Expiration: _____

Military Service

Have you ever been in the Armed Forces or National Guard? Yes No

Branch: _____ Date Entered: _____ Discharge Date: _____

Employment History

Please list your past three employments, starting with your most recent.

Employer Name: _____

Address: _____

Phone Number: _____

Job Title: _____ Dates of Employment: _____

Supervisor: _____ End Salary: _____

Reason for Leaving: _____

Skills, Tasks, or Duties Performed: _____

May we contact this employer? Yes No

Employer Name: _____

Address: _____

Phone Number: _____

Job Title: _____ Dates of Employment: _____

Supervisor: _____ End Salary: _____

Reason for Leaving: _____

Skills, Tasks, or Duties Performed: _____

May we contact this employer? Yes No

Employer Name: _____

Address: _____

Phone Number: _____

Job Title: _____ Dates of Employment: _____

Supervisor: _____ End Salary: _____

Reason for Leaving: _____

Skills, Tasks, or Duties Performed: _____

May we contact this employer? Yes No

References

Please list at least three references, one of which should be a previous supervisor, none of which may be relatives.

Name and Title: _____

Address: _____

Phone: _____

Office Use Only

Name and Title: _____

Address: _____

Phone: _____

Office Use Only

Name and Title: _____

Address: _____

Phone: _____

Office Use Only

Please use the back of this application to list any other skills, training, or education that you feel we should consider.

By signing below the applicant is certifying that the information contained in this application is accurate and true. The applicant also gives permission to the potential employer to contact any references or previous employers, as indicated on this application.

Signature

Date

RiverStone Preschool and Daycare

Application for Employment

General Information

Date: _____

Name (Last, First, MI, Maiden): _____

Social Security Number: _____ - ____ - _____

Street or PO Box: _____

Town: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Evening Phone: _____

Application Information

Position Applying For: _____

Desired Salary: _____

Available Start Date: _____

Educational History

Level of Schooling	School Name and Address	Years Attended	Course of Study
High School			
Associate's Degree			
Bachelor's Degree			
Master's Degree			
Additional Education			