



## APPLICATION FOR EMPLOYMENT

Position applying for: \_\_\_\_\_

☐ Full-time   ☐ Part-time   ☐ Summer only

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Are you able to work legally in the United States?   ☐ YES   ☐ NO

Do you have a valid driver's license?   ☐ YES   ☐ NO

Do you have access to an auto?   ☐ YES   ☐ NO

Are you between the ages of 18 and 65?   ☐ YES   ☐ NO   If not, please state your age: \_\_\_\_\_

| <u>Education:</u>               | Major | Dates<br>Attended | Certificate<br>or Degree | Graduation<br>Date |
|---------------------------------|-------|-------------------|--------------------------|--------------------|
| High School                     |       |                   |                          |                    |
|                                 |       |                   |                          |                    |
| College/University/Trade School |       |                   |                          |                    |
|                                 |       |                   |                          |                    |

Licenses or certificates held, or credentials qualifying you for this employment (other than degree):

\_\_\_\_\_

\_\_\_\_\_

**Special skills or talents:**

☐ List languages other than English \_\_\_\_\_   ☐ Computer   ☐ Art

☐ Other: \_\_\_\_\_

**Membership in Professional Organizations (list):**

\_\_\_\_\_



**Application for Employment (continued)**

**Early Childhood Education Courses Taken:** Not applicable if applicant has a college degree in early childhood education or a related field.

| Course title/subject | No. of units |
|----------------------|--------------|
|                      |              |
|                      |              |
|                      |              |
|                      |              |
|                      |              |

Are you presently employed? ☐ YES ☐ NO

May we contact your employer? ☐ YES ☐ NO

Would you be willing to continue your education: ☐ YES ☐ NO

Why do you feel you are qualified for the position you are applying for?

|  |
|--|
|  |
|  |
|  |

**References: Information on references must be complete (i.e. address, phone #'s)**

**Professional: not related to you (list at Least Two)**

| Name | Address | Title/Relationship | Phone No. |
|------|---------|--------------------|-----------|
|      |         |                    |           |
|      |         |                    |           |
|      |         |                    |           |

**Personal not related to you: (list at Least Two)**

| Name | Address | Relationship | Phone No. |
|------|---------|--------------|-----------|
|      |         |              |           |
|      |         |              |           |
|      |         |              |           |

**Application for Employment (continued)**

**Work Experience** List beginning with the most recent job.



## The Coordinated Child Development Program, Inc. (CCDP)

| Employer Name & Address | Job Description    | To                 | From |
|-------------------------|--------------------|--------------------|------|
|                         |                    |                    |      |
|                         | Reason for Leaving | Name of Supervisor |      |
|                         |                    |                    |      |

| Employer Name & Address | Job Description    | To                 | From |
|-------------------------|--------------------|--------------------|------|
|                         |                    |                    |      |
|                         | Reason for Leaving | Name of Supervisor |      |
|                         |                    |                    |      |

| Employer Name & Address | Job Description    | To                 | From |
|-------------------------|--------------------|--------------------|------|
|                         |                    |                    |      |
|                         | Reason for Leaving | Name of Supervisor |      |
|                         |                    |                    |      |

Volunteer or unpaid experience: \_\_\_\_\_

**Dependent upon the position there may be job related testing required as part of the application process.**

**I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand that any omission or false statement made by me on this application and any supplement to it (i.e. resume, cover letter, etc.) will be sufficient grounds for failure to employ or for my discharge should I become employed with The Coordinated Child Development Program, Inc.**

**I understand that any employment offer will become void if the results of the state (OCFS) background checks should find me not suitable to work with or around children or if I cannot perform the job requirements and responsibilities as described in the job description.**

**I also understand that CCDP is an employer-at-will organization and abides by the provisions of that status, which permits the organization or the employee to terminate the employee relationship at any time for any reason.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**