Coulee Children's Center, Inc.
Application for Employment

Mail application to:
Coulee Children's Center
2935 East Ave. So.
La Crosse, WI 54601
Or Email to: coulee.director@couleechildrenscenter.com

All applications are considered for employment for all positions without regard to race, religion, creed, gender, national origin, age, disability, political orientation, status, or any other legally protected status.

General Information:

Full Name: _____

Address: _____

Telephone Number: _____ / _____

Email Address: _____

What is the best way to contact you? Phone____Email_____Text_____

Other_____

Position you are applying for? Admin_____Teacher____Asst. Teacher_____Kitchen____

Other_____

Date you are available to begin work _____

Desired hourly wage range $_____ to $_____

How did you hear about Coulee Children's Center? _____

Please circle the desired work schedule you are seeking (circle all that apply)

Full-time Part-time Flex Schedule Afternoon only/Evening (until 5:45p)

Please circle the desired age group you prefer to work with (circle all that apply)

Infant/Toddler 2 year-olds 3 year-olds

4/5 year-olds School Age

Do you meet the ECE educational requirements to be a Lead Teacher? Yes No

If no, are you willing to work towards meeting those requirements? Yes No

Do you meet the ECE educational requirements to be an Asst. Teacher? Yes No

If no, are you willing to work toward meeting those requirements? Yes No

Current Employer (if employed) _____ May we contact them? Yes No

Phone_____ Email _____

Are you prevented from lawfully becoming employed in this country because of visa or immigration status?

Yes No

Are you over the age of 18 years? Yes No

Pre-Employment Questions:

1. Have you obtained your **CPR** with AED training for adults, infants, and children in the past two years? Yes No Date of Expiration_____

2. Have you obtained **First Aid** Training? Yes No
   Date taken _____ Source of Training _____

3. Do you have a training certificate in the **SIDS/Back to Sleep** program? Yes No
   Date taken _____ Source of training _____

4. Do you have a training certificate in **Abusive Head Trauma Prevention**? Yes No
   Date taken _____ Source of training _____

5. Do you have a training certificate in Child Abuse Prevention? Yes No
   Date taken _____ Source of training _____

6. Have you ever had a criminal background check? Yes No When? _____

7. Are you willing to participate in on-going education and meetings as offered by Coulee Children's Center and the community? Yes No

8. A basic adult physical is a pre-requirement for working with children in an early learning center. Are you willing to obtain this for your employment within the first 3 months (unless you have had one in the past 6 months and can obtain documentation)? Yes No

9. Are you able to perform the physical requirements of working with children ages 4 weeks to 12 years, including the ability to properly lift children (approximately 40lbs) when necessary, and bending properly (bending at the knees to lift)? Yes No

10. Are you capable of performing in a reasonable manner, with or without reasonable accommodations, the activities involved in the early learning occupation for which you have applied? Yes No

**A job description is available for your review if you have any questions about your expectations*

11. Describe any training, skills, and extra-curricular activities you have that will contribute to your employment at Coulee Children's Center.

12. Describe any workshops, continuing education, or in-service training that has been a benefit to you in the child care field.

13. List any professional, educational, or early childhood organizations to which you belong(ed). Please include dates and any positions you have held.

14. List any other additional experience you have working with children, being a care giver, etc.

Education Information:

Name of High School _____ Graduated? Yes No Year: ____

Name of College _____ Graduated? Yes No Year: ____

Degree Granted or Current Course of Study _____

If currently in college, expected date of graduation _____

**please include transcripts if at all possible at the time of application (official or unofficial)*

Early childhood certifications held? (*circle all that apply*):

Introduction to Childcare Profession Skills and Strategies for Teachers

Fundamentals of Infant and Toddler Care CDA

I have a credential through TEACH (*list specific credential*) _____

Experience:

**Start with present or most recent job. Please also include any job-related military service or volunteer work.*

Employer _____ Position/Title_____

Supervisor's Name _____ Dates Employed _____

Reason for leaving? _____

May we contact this employer? Yes No Phone Number _____

Employer _____ Position/Title _____

Supervisor's Name _____ Dates Employed _____

Reason for leaving? _____

May we contact this employer? Yes No Phone Number _____

Employer _____ Position/Title _____

Supervisor's Name _____ Position/Title _____

Reason for leaving? _____

May we contact this employer? Yes No Phone Number _____

References:

Reference Name _____ Type: Personal/Professional

How do you know this person? _____ How long? _____

Phone Number _____ Email _____

Reference Name _____ Type: Personal/Professional

How do you know this person? _____ How long? _____

Phone Number _____ Email _____

Reference Name _____ Type: Personal/Professional

How do you know this person? _____ How long? _____

Phone Number _____ Email _____

All of the information provided in this application is true to the best of my knowledge and I am voluntarily applying for this position:

_____ _____

Applicant Signature Date

For Office Use:

Date Received: _____ *Admin Initial:* _____

Interview Date/Other Info: _____

Additional Comment:

_____

_____

_____