

# EMPLOYMENT APPLICATION

Children's Workshop Montessori is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

## PERSONAL

<i>Full name (please print)</i>				<i>Date</i>
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
<i>E-mail</i>				
Position Sought <i>(Please circle):</i>	Guide	Assistant	Aide	Administration
Hours Sought <i>(Please circle):</i>	Full Time	Part Time		
Date Available: _____	Phone Number: _____			
Are you over 18 years old? <i>(Please circle):</i>	Yes		No	
May we contact your present employer? <i>(Please circle):</i>	Yes		No	
Are you legally eligible for employment in the United States? <i>(Please circle):</i>	Yes		No	

*(If offered employment, you will be required to provide documentation to verify eligibility.)*

**Please note: If any further requested information is also included in your submitted resume, you may so indicate instead of including it on this form.**

\_\_\_\_\_  
*High School (Name, Location, Course of Study, # Years Completed & Diploma or Degree Received)*

\_\_\_\_\_  
*College / University (Name, Location, Course of Study, # Years Completed & Diploma or Degree Received)*

\_\_\_\_\_  
*Montessori Training (Name, Location, Course of Study, # Years Completed & Diploma or Degree Received)*

\_\_\_\_\_  
*Graduate Studies (Name, Location, Course of Study, # Years Completed & Diploma or Degree Received)*

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? Please describe:

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## EMPLOYMENT HISTORY (Please start with your current or most recent position)

Name of Employer

Phone #

Address

Dates Employed

Supervisor's Name & Title

Briefly Describe your Responsibilities: \_\_\_\_\_

Name of Employer

Phone #

Address

Dates Employed

Supervisor's Name & Title

Briefly Describe your Responsibilities: \_\_\_\_\_

Name of Employer

Phone #

Address

Dates Employed

Supervisor's Name & Title

Briefly Describe your Responsibilities: \_\_\_\_\_

Name of Employer

Phone #

Address

Dates Employed

Supervisor's Name & Title

Briefly Describe your Responsibilities: \_\_\_\_\_

## EMPLOYMENT HISTORY (Continued)

<hr/>	
<i>Name of Employer</i>	<i>Phone #</i>
<hr/>	
<i>Address</i>	
<hr/>	
<i>Dates Employed</i>	<i>Supervisor's Name &amp; Title</i>
<hr/>	
<i>Briefly Describe your Responsibilities:</i>	
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*(Use back of page if more space is required)*

## REFERENCES (Include 2 professional & 1 personal)

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<i>Full Name</i>	<i>Occupation</i>
<hr/>	
<i>Address</i>	
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<i>Phone</i>	
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<i>Full Name</i>	<i>Occupation</i>
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<i>Full Name</i>	<i>Occupation</i>
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<i>Address</i>	
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<i>Phone</i>	
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## APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the information set forth in the above employment application (and in any related documents or interviews) is true and complete to the best of my knowledge. I understand that any false or misleading information or significant omissions may disqualify me from further consideration for employment and may lead to my dismissal from employment if discovered at a later date. I authorize Children's Workshop Montessori to verify the accuracy of the information I provided and obtain reference information on my work performance.

I understand that applicants for employment in certain positions are required to successfully complete a pre-employment criminal background check prior to any final offer and I consent to this check.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and authorization to work. Failure to submit such proof shall result in immediate termination of employment. If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

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*Signature of Applicant*

*Date*

## AUTHORIZATION FOR REFERENCE CHECKS

In order to further my evaluation as a candidate for employment with Children's Workshop (CW), I authorize CW to contact, obtain, and verify the accuracy of information contained in this application (and in any related documents or interviews) from all previous employers, educational institutions, and references. I also hereby authorize all individuals I have listed as references and others who have knowledge about my qualifications for employment to provide information about any and all aspects of my work performance or job-related qualifications as requested by authorized representatives of CW.

This authorization permits written and oral disclosure of information about any professional and personal work-related qualifications even if it is classified as private data.

I hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

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*Signature of Applicant*

*Date*