



MILE SQUARE EARLY LEARNING CENTER

Employment Application

Applicant Information			
Last Name:		First Name:	M.I.
Street Address:		Apt./Unit#:	
City	State	Zip	
Home Phone	Cell Phone	Other Phone	
E-mail Address	Date Available	Desired Salary	
Social Security No.		Position Applied For	
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, are you authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Have you ever worked for this company? Yes <input type="checkbox"/> No <input type="checkbox"/> if so, when?			
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> if so, explain			
EDUCATION			
High School		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
Graduate		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
REFERENCES			
<i>Please list three professional references</i>			
Full Name		Years Known	
Company		Phone	
Address			
Full Name		Years Known	
Company		Phone	
Address			
Full Name		Years Known	
Company		Phone	
Address			

PREVIOUS EMPLOYMENT

Company		Phone
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, state reason:		

Company		Phone
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, state reason:		

Company		Phone
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, state reason:		

WORK SCHEDULE AVAILABILITY

Mile Square ELC has various schedules throughout the day: Monday through Friday 7:30am to 6:00pm.

Can you work a flexible schedule? Yes No Can you work overtime? Yes No

Indicate the hours you are available to work: M _____ T _____ W _____ Thur. _____ Fri. _____

Employment desired: Full-Time Part-Time Full-Time or Part-time

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ **Date:** _____