

# APPLICATION FOR EMPLOYMENT

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Fort Myers, FL 33908  
239-590-3806

Instructions: All information on this application must be truthful and correct. Falsification or misrepresentation on this application is cause for immediate dismissal.

\_\_\_\_\_  
Applicant's Name Home: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Phone Number

\_\_\_\_\_  
Applicant's Home Address Applicant's Social Security Number \_\_\_\_\_

\_\_\_\_\_  
Applicant's Date of Birth Are you at least 16 yrs old? Yes No

Can you legally work in the U.S.? Yes No (Proof of citizenship or immigration status will be required upon employment.)

\_\_\_\_\_  
Contact Person in case of an Emergency Relationship \_\_\_\_\_  
\_\_\_\_\_  
Address Home: \_\_\_\_\_ Cell: \_\_\_\_\_  
Phone Number

Have you ever held a childcare license with the Department of Children and Family Services, or been registered to provide childcare in your home? Yes No

If yes, please identify where and when the license was held and what type of program the license was for:  
\_\_\_\_\_

While employed in a child care program, have you ever been the subject of disciplinary action, or been the party responsible for a child care facility receiving an administrative fine? Yes No

Have you ever been convicted of a criminal offense? Yes No

If yes, please state the nature of the offense, where the offense occurred, date and sentence imposed:  
\_\_\_\_\_

# EDUCATIONAL HISTORY

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Name of High School

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Dates Attended

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Address

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Highest grade level obtained

Do you have a high school diploma or GED Yes No

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Name of College

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Dates Attended

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Address

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Highest Grade Level Obtained

Did you graduate? Yes No

Other Education (Please Specify): Describe level and nature of coursework and where it was obtained

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Do you have certificates for the state mandated 45 hrs that is required? Yes No

List the names and locations of ALL the child care facilities in which you have been employed:

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

What do feel most qualifies you for this position?

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What are your professional goals?

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## EMPLOYMENT HISTORY

List below all present and past employment, in chronological order, of any jobs you have held during the last five years. All jobs will be contacted as a reference.

_____ Place of Employment	_____ Dates of Employment
_____ Address	_____ Phone Number
_____ Supervisor's Name	_____ Reason for Leaving
May we contact them?    Yes    No	
Describe your job duties: _____	
_____	

_____ Place of Employment	_____ Dates of Employment
_____ Address	_____ Phone Number
_____ Supervisor's Name	_____ Reason for Leaving
May we contact them?    Yes    No	
Describe your job duties: _____	
_____	

_____ Place of Employment	_____ Dates of Employment
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May we contact them?    Yes    No	
Describe your job duties: _____	
_____	