

The Children's Center at Mulberry
719 Mulberry Street, Macon, GA 31201
478.745.8601
Employment Application

Date _____
Position Desired _____
Date Available _____
Interviewed By _____

Name (First) _____ (Middle) _____ (Last) _____

Home address, City, State, Zip Code _____ Home Telephone Number _____

Birth Date _____ Social Security Number _____

Do you have a valid Driver's License? _____ Yes _____ No
If yes, give License number and class of license: _____

If you are under age 18, can you submit a work permit if hired? _____
If you are not a US citizen, do you have a Visa to work in the US? _____
If yes, what kind of Visa classification? _____
Visa Registration No: _____ Expiration date _____

Has bond or security clearance ever been denied and/or or canceled? _____ Yes _____ No
If yes, please explain: _____

Would you like to work: Full-time? _____ Part-time? _____

List days and hours available to work _____

EDUCATION (Attach documentation of qualifying education)

PLACE	DATES	DIPLOMA, CERTIFICATE, DEGREE
ELEMENTARY	_____	_____
SECONDARY	_____	_____
COLLEGE	_____	_____
OTHER	_____	_____

Experience working with groups of children other than your own
(Indicate ages of children, your duties, dates of time you worked in the position, reason for leaving)

Attach documentation of experience working with children

Are there any other experiences, licenses, certifications, or skills that you feel would especially qualify you for work with our organization? If so, describe. _____

Qualifying Educational Background: (college, CDA, Associates etc.) _____

Teaching or Instruction background _____

Have you ever taught in a faith based program? _____

Have you ever taught a faith based curriculum? _____

Do you worship regularly in a faith based community? _____

If so, where? _____

If no, please state your religious preferences: _____

Bright From the Start: Georgia Department of Early Care Learning requires annual child care training, are you willing to participate? Yes _____ No _____

Have you attended/completed any child care training courses? ____Yes ____ No

If yes, list: _____

Have you had CPR training within the past two years? ____ Yes ____ No

If yes, give expiration date _____

Have you had First Aid training within the past three years? _____ Yes _____ No

If yes, give expiration date _____

***Please attach copies of your Infant/Child CPR and First Aid certificates to this application.**

Having read the job description for the position for which you are applying, are you in all respects, able to adequately perform the duties as described? _____ Yes _____ No

If no, please explain. _____

Ten Year Employment History: Begin with your most current or last employer. If you have been unemployed during any time within the past ten years, list how you spent your time. (e.g. student, housewife, unemployed, etc.)

Month/Year	Name and Address of Employer	Position
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		
From _____ To _____		

May we contact previous employers? _____ Yes _____ No

Please list the name, address and daytime telephone number of three, non-related, professional references.

1.

2.

3.

*If you have an updated resume, please attach a copy of it to this application.

Do you have a criminal record _____ Yes _____ No

If yes, explain: _____

***Please attach a copy of a local GCIC or NCIC background check to this application.**

Have you ever been shown by credible evidence, e.g. a court order or jury, a department investigation or other reliable evidence to have abused, neglected or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct? _____ Yes _____ No

If yes, explain: _____

Under the Americans with Disabilities Act of 1991, this program is required to reasonable accommodate individuals wit a disability. The reasonable accommodation requirement applies to the application process, any pre-employment testing, interviews and actual employment, but only if the program supervisor is made aware that an accommodation is required. If you are disabled and require accommodation, you may request it at any time during the interview process. You are obligated to inform the program director of your needs if it will impact your ability to perform the job for which you are applying.

I certify that all information on this application is correct. I have not given any false statement concerning my qualifications requirements.

Signature _____ Date _____