Palms Day School A SCHOOL FOR YOUNG LEARNERS

Application for Employment

Palms Day School Application for Employment

Personal Information Date of Application:					
Last Name	First Name N		liddle	Preferred Name	
Other Name(s) you have worked under?					
Current Address Current Telephone Number					none Number
City	State	Zip Ema		Email Address	
Are you 18 years or older? If no, provide the date of birth					
Permanent Address (if different than above)					
City	State Zi	р	Telep	hone Number	Email Address

Position Applied For:		Expected Salary:			
Full-Time Part-Time Substitute		Days Available to Work M T W TH F	Times available to work		
Have you previously applied for employment with Palms Day School? □ Yes □ No	If yes, when?	For what position?	If hired, where?		
Do you have relatives employed by Palms Day School? Yes No If yes, name, relationship, and location					
How did you hear about Palms Day School?					

Education (Transcripts Required)				
High School Attended City State Graduated? Ves No GED				
Post High School Education (College, G	raduate, Business, C	DA, etc.)		
College Attended		Dates Attended		
City	State	Field of Study		
Degree/Certification Received		Total Education Credits	Years Completed	
College Attended		Dates Attended		
City	State	Field of Study		
Degree/Certification Received		Total Education Credits		
Are you currently enrolled in classes?	Yes 🗆 No If yes, whi	ch classes?		



Course		Date	of	
Expiration	Course		Date	
of Expiration	Course			
Date of Expiration				

the job in which you are applying?

We are an EQUAL OPPORTUNITY EMPLOYER and will not discriminate on the basis of race, color, religion, sex,

ethnic origin, age, marital status, han	dicap or disability in th	e hiring of our certified and/or n	on-certified personnel.
Employment History- Beginning	with your present or most re-	ecent employer, describe your employ	ment experiences below:
Company Name	Dates of Em	ployment- from mo/yrto mo./	yr
Address	City	State	Zip
Supervisor's Name		Telephone Number	
Starting Position	Starting Salary	Ending Position	Ending Salary
Description of your work &			
responsibilities:			
Reason for leaving:			
Company Name	Dates of Em	ployment- from mo/yrto mo./	yr
Address	City	State	Zip
Supervisor's Name		Telephone Number	
Starting Position	_ Starting Salary	Ending Position	Ending Salary
Description of your work &			
responsibilities:			
Reason for leaving:			



Company Name	Dates of E	mo./yr	
Address	City	State	Zip
Supervisor's Name		Telephone Number	
Starting Position	Starting Salary	Ending Position	Ending Salary
Description of your work & responsibilities:			
Reason for leaving:			

Supplemental Driving Information- Required if you will be driving a company vehicle. If not, continue on to the next page.					
Do you have a valid driver's license? 🗆 Yes 🗆 No License Number State					
List accidents & violations v	within the past three(3) ye	ears. If none, write "NONE"			
Date		Description of Accident or Violation			
Have you ever been denied a licen	se, permit or the privilege of o	perating a motor vehicle? 🗆 Yes 🗆 No			
Has any license, permit or privileg	e ever been suspended or revo	ked? 🗆 Yes 🗆 No			
If you answered yes to any of these questions, please explain in detail: (attach sheet if necessary)					

Background Clearance

1. Do you have, or have you applied for the legal right to remain permanently and work in the United States?
Ves
No

2. Have you ever been discharged or asked to resign by an employer? □ Yes □ No If yes, please explain:

3. Have you ever been investigated by child protective services or any comparable entity regarding your ability to work with children?
Yes
No If yes, please explain

 Have you ever been convicted of any crime (misdemeanor or felony) □ Yes □ No If yes, please explain:



5. Have you ever had a determination related to child abuse, child neglect and/or unlawful sexual offenses?
Yes
No If yes, please explain:

References

Please provide three references who are not family or close friends. List supervisors or those who know you in a working environment and who can comment on work integrity. List references for any child related experiences.

1	Contact Name	Occupation	Company
	Relationship to Applicant	Telephone Number	Email Address
2	Contact Name	Occupation	Company
	Relationship to Applicant	Telephone Number	Email Address
3	Contact Name	Occupation	Company
	Relationship to Applicant	Telephone Number	Email Address

By signing below I certify that I have read, understand and agree to each of the following statements: •

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge and I have not knowingly withheld any information which, if known to Palms Day School, would affect my application unfavorably. • This employment application will be considered active for ninety (90) days from the date below. If I want to be reconsidered for a job with Palms Day School after this period of time I must fill out another application.

• I understand that nothing contained in this Employment Application or in the granting of an interview is intended to create an employment contract between Palms Day School and myself for either employment or for the providing of any benefit. If an employment relationship is established I understand that my employment is "AT WILL" and can be terminated, with or without cause, with or without notice, at the option of either Palms Day School or myself.

• In consideration of my employment with Palms Day School, I agree to abide by all of Kids Country's rules and regulations. • If granted a position with Palms Day School, I agree to produce documents such as a high school diploma, college diploma, college transcripts or other items that verify information contained in this application.

• If an offer of employment is made to me, I understand that I may be required to take a physical examination at my expense. • If I am hired by Palms Day School, and if Palms Day School discovers at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-603, C.R.S, and upon conviction thereof shall be punished accordingly.

Applicant Name (print) Signature Date



Please answer the following questions, so that we can gain a better knowledge of you and your experience with children.

- 1. Why do you want to work for Palms Day School?
- 2. What is your best/worst personal characteristic?
- 3. How does this job fit in with your overall career goals?
- 4. How would your neighbor describe you?
- 5. How will Palms Day School benefit from having you on our team?
- 6. What aspects of your work experience or your education have prepared you for this job?

- 7. Can you explain what Object Permanence is? (Please give an example)
- Please give an example of a Fine Motor Activity and a Gross Motor Activity you could do with a preschooler.

Thank you for your interest in Palms Day School

