



EMPLOYMENT APPLICATION

APPLICATION DATE:		
Are you currently employed? YES NO	Date Available:	
Position Applying for:	Preferred Age Group:	
Desired Salary:	Days or Hours Available:	

PERSONAL INFORMATION

Name:		
Address:		
Social Security Number:	Date of Birth:	
Phone Number:	Email Address:	
Are you the age of 18 or older? YES NO	U.S. Citizen: Yes No	
Are you able to lift up to 40lbs? YES NO	<u>If no, please explain:</u>	
Have you ever been convicted of a crime? YES NO		<u>If yes, please explain:</u>

Will you have a child attending A New World of Learning? YES NO
Child's Name: Date of Birth:
Child's Name: Date of Birth:

EMERGENCY CONTACT

Name:	Relationship:
Address:	
Phone Number:	Email Address:

EDUCATION

	School:	City:	Area of Study:	Degree Earned:
High School				
College				
Other				
Other				

EXPERIENCE *(list most recent first)*

Company:		Phone Number:	
Address:			
Dates of Employment: FROM		TO	Contact:
Job Title:		Salary:	
What were your responsibilities in this position?			
Reason for Leaving?			

May we contact this previous employer? YES NO

Company:		Phone Number:	
Address:			
Dates of Employment: FROM		TO	Contact:
Job Title:		Salary:	
What were your responsibilities in this position?			
Reason for Leaving?			

May we contact this previous employer? YES NO

Company:		Phone Number:	
Address:			
Dates of Employment: FROM		TO	Contact:
Job Title:		Salary:	
What were your responsibilities in this position?			
Reason for Leaving?			

May we contact this previous employer? YES NO

Company:	Phone Number:
Address:	
Dates of Employment: FROM	TO
Contact:	
Job Title:	Salary:
What were your responsibilities in this position?	
Reason for Leaving?	

May we contact this previous employer? YES NO

PROFESSIONAL REFERENCES

Name:	Years Known:
Phone Number:	Email Address:
Name:	Years Known:
Phone Number:	Email Address:
Name:	Years Known:
Phone Number:	Email Address:

FOR OFFICE USE ONLY:

Start Date:	Salary Offered:
Comments:	