

Ladybug Application for Employment

859 Vista Blvd. Waconia, MN 55387 952-442-5057

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age marital or veteran status, sexual orientation, or any other legally-protected status.

Position(s) applied for: Teacher Assistant Teacher Aide Kitchen Technician

Date of application: _____ Date available to work: _____

Name: _____

Last First Middle

Address: _____

Number Street City State Zip Code

Home Phone: _____ Social Security Number: _____

Cell Phone: _____ Email: _____

Are you 18 years of age or older? ___ Yes ___ No

Have you filled out an application with us before? ___ Yes (Date) ___ No

Have you ever been employed with us before? ___ Yes (Date) ___ No

Are you currently employed? ___ Yes ___ No

May we contact your present employer? ___ Yes ___ No

Are you prevented from lawfully becoming employed
in the country because of Visa or Immigration Status? ___ Yes ___ NO

Proof of citizenship or immigration status will be required upon employment

Are you available to work: ___ Full Time ___ Part Time ___ Substitute ___ Seasonal

Have you been convicted of a felony within the last 7 years? ___ Yes ___ No

Conviction will not necessarily disqualify an applicant from employment

If yes, please explain: _____

Education

	Name & Address of School	Course of Study	Check Years Completed	Did you Graduate?	List Diploma or Degree
High School			1 2 3 4	___ Yes ___ No	Diploma Mandatory
Vocational College				___ Yes ___ No	
Undergraduate College			1 2 3 4	___ Yes ___ No	
Graduate School			1 2 3 4	___ Yes ___ No	

Languages

Indicate any foreign languages you can speak, read, and/or write:

Speak: _____ Fair Good Fluent

Read: _____ Fair Good Fluent

Write: _____ Fair Good Fluent

Trainings

Indicate most recent training in the following skills:

	Training Source	Date	# of Hours	Currently Certified?
First Aid				___ Yes ___ No
Infant & Child CPR				___ Yes ___ No
Adult CPR				___ Yes ___ No
Emergency Water Safety				___ Yes ___ No

Describe any specialized training, workshops, seminars, internships, skills or extra-curricular activities:

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed	Work Performed
Address		
Phone #	Start Pay End Pay	
Job Title/ Supervisor		
Reason for Leaving		

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Job Title/ Supervisor		
Reason for Leaving		

If you need additional space, please continue on a separate sheet of paper.

Additional Information

List professional, business, or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Summarize special job-related skills and qualifications acquired from employment or other experiences.

State any additional information you feel may be helpful to us in considering your application.

References (no former employers or relatives)

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Do not answer this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job for which you have applied? A description of the activities involved should be available with this application.

Yes

No

Applicant's Statement

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

I authorize investigation of all statements in this application for employment as maybe necessary in arriving at an employment decision.

I understand and acknowledge that, unless defined be applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without any written document or by conduct unless such changes is specifically acknowledged in writing by an authorized executive of this organization.

I also understand that any offer of employment will be conditional upon my successful completion of a state Applicant Background Study and documentation of my credentials, work experience, and accredited child development training courses necessary to verify with Department of Human Services licensing requirements.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of applicant

Date