

Employer: _____ Supervisor: _____

Address: _____ Telephone: _____

Salary or wage: \$ _____ per _____ Hours per week: _____

Position: _____ Dates: _____ to _____

Duties: _____

Reason for Leaving: _____

=====

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Address: _____ Telephone: _____

Salary or wage: \$ _____ per _____ Hours per week: _____

Position: _____ Dates: _____ to _____

Duties: _____

Reason for Leaving: _____

=====

May we contact your present employer? : Yes _____ No _____

ADDITIONAL SKILLS: _____

REFERENCES: (Please list 2 personal and 2 professional)

1. Name _____ Relationship _____

Address _____ Phone _____

2. Name _____ Relationship _____

Address _____ Phone _____

3. Name _____ Relationship _____

Address _____ Phone _____

4. Name _____ Relationship _____

Address _____ Phone _____

I certify that the statements made by me on the application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any mis-statement of fact, I am subject to disqualification and dismissal. All statements made on this application, including employment information, are subject to verification as condition of employment.

Signature

_____/_____/_____
Date



AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize the release of any information regarding my previous employment and/or personal character when officially requested by **Carelot Children's Center, Inc.** for the purposes of determining employment suitability.

Signature

Date

Name Printed