

APPLICATION FOR EMPLOYMENT

Maple Tree Childcare Center

2625 Benet Road

Maplewood, MN 55109

651-770-0766

www.stpaulsmonastery.org

E-mail: JSchlauch2@aol.com



Name _____ Today's date _____

Address _____
Street City Zip

Email _____ Phone _____

Position desired (Circle one) Aide Assistant Teacher

Hours of availability

Monday	Tuesday	Wednesday	Thursday	Friday

Are you over the age of 16? _____

(State law requires employees to be at least 16 years old.)

How were you referred to Maple Tree? _____

Are you authorized to work in the United States? _____

Do you have current training in first aid or CPR? _____

Are you able to lift a 35 pound child and carry the child 25 yards? _____

List special skills you will bring to the program (musical talents, language abilities, etc.): _____

List volunteer work and participation in professional groups:

References

Name	Occupation	Phone number

May we contact your references? _____

Education

School	Name and location of school	Course of study	Number of years completed	Degree or diploma issued
High school				
College				
Other				

Employment

Company name and address	Hire date and end date	Supervisor	Position held and salary	Reason for leaving

I certify that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application, whether on this document or not, may result in rejection of my application or discharge at any time during my employment. I authorize Maple Tree Childcare Center to verify any of this information. I also authorize any former employer, person, school, company, credit agency, background check agency or government agency to give Maple Tree Childcare Center information they have about me. In consideration of Maple Tree Childcare Center's review of this application I release Maple Tree Childcare Center and all providers of information from any liability as a result of furnishing and receiving this information.

Signature

Date