Affordable Child Care Learning Center
255 Barbour Street
Hartford, CT 06120
Phone: 860-519-0549 **Fax:** 860-216-0158
Email: affordablelearninghartford@gmail.com

Employment Application

Office Use:
Date of Hire:

Today's Date: _____

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number Home: _____ Cell: _____

Email Address: _____

Emergency Contacts:

Name: _____ Relationship: _____ Phone Number: _____

Name: _____ Relationship: _____ Phone Number: _____

Preferred hospital in case of an emergency: _____

EDUCATION:

EDUCATION	SCHOOL/INSTITUTE	DATES ATTENDED & COMPLETED	DIPLOMA/DEGREE/CERTIFICATE
High School			
College/University			
Graduate			
Other			

Affordable Child Care Learning Center
255 Barbour Street
Hartford, CT 06120
Phone: 860-519-0549 **Fax:** 860-216-0158
Email: affordablelearninghartford@gmail.com

EMPLOYMENT HISTORY (Most Recent First):

Employer: ________________________________ Supervisor: ______________________ Phone: ___________
Address: ___________________________________ City: ________________ State: ____ Zip: ____________
Dates Employed: From ________ To: _______ Pay Rate: $____________
Reason For Leaving: ____
Duties/Responsibilities/Experiences:
____
____
____
____
____

Employer: ________________________________ Supervisor: ______________________ Phone: ___________
Address: ___________________________________ City: ________________ State: ____ Zip: ____________
Dates Employed: From ________ To: _______ Pay Rate: $____________
Reason For Leaving: ____
Duties/Responsibilities/Experiences:
____
____
____
____
____

Employer: ________________________________ Supervisor: ______________________ Phone: ___________
Address: ___________________________________ City: ________________ State: ____ Zip: ____________
Dates Employed: From ________ To: _______ Pay Rate: $____________
Reason For Leaving: ____
Duties/Responsibilities/Experiences:
____
____
____
____
____

Affordable Child Care Learning Center
255 Barbour Street
Hartford, CT 06120
Phone: 860-519-0549 **Fax:** 860-216-0158
Email: affordablelearninghartford@gmail.com

CHILD CARE TRAINING:

List all courses, workshops, and conferences related to child development and early childhood education in the past 12 months. This includes CPR and First**. (please provide copies of certificates received)**

Title of Course/Workshop/Conference	Sponsor	Location	Date(s)	Number of hours

REFERENCES:

List at least three people who are not related to you by blood, marriage, or adoption to be contacted as references. (at least one should be a former employer)

Last Name: _____ First Name: _____ Relationship: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone Number Home/Business: ____-_____-_____ Cell: _____-_____-_____ Fax: ____-_____-_____

Email Address: _____

How long have you known this person? _____

Last Name: _____ First Name: _____ Relationship: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone Number Home/Business: ____-_____-_____ Cell: _____-_____-_____ Fax: ____-_____-_____

Email Address: _____

How long have you known this person? _____

Affordable Child Care Learning Center
255 Barbour Street
Hartford, CT 06120
Phone: 860-519-0549 **Fax:** 860-216-0158
Email: affordablelearninghartford@gmail.com

Last Name: _____ First Name: _____ Relationship: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone Number Home/Business: ____-_____-_____ Cell: _____-_____-_____ Fax: ____-_____-_____

Email Address: _____

How long have you known this person? _____

AVAILABILITY:
Date available to start: _____

DAYS AND HOURS AVAILABLE				
Monday	Tuesday	Wednesday	Thursday	Friday

I certify that the statements made by me on this 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 misstatements of fact, I am subject to disqualification, dismissal, or other action and subject to criminal penalties as prescribed by law

I permit Affordable Child Care Learning Center to examine my references, record of employment, education record and any other information I have provided to conduct a comprehensive background check. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them.

Affordable Child Care Learning Center is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Applicant's Signature: _____ Date: _____

Affordable Child Care Learning Center
255 Barbour Street
Hartford, CT 06120
Phone: 860-519-0549 **Fax:** 860-216-0158
Email: affordablelearninghartford@gmail.com

Employee Acknowledgment Form

I have received a copy of the Center's Employee Handbook. I recognize and accept my responsibility to read and become familiar with its contents. I acknowledge it is designed to provide general information relative to various policies and procedures. I also understand that the contents of this handbook may change. Further, I understand that the Center reserves the right to add, delete, or modify the contents of the handbook at any time and for any reason.

I also acknowledge that:

1. I accept the contents of the handbook and agree to abide by the information set forth.
2. I understand that the information in the handbook does not create, nor is it intended to create a promise or contract of continued employment. I understand that my employment is "at will." I understand that I may be terminated at any time with or without cause or notice.

_____ _____

Employee signature Date