

# **APPLICATION FOR EMPLOYMENT**

Submit this completed application and a copy of your resume to: kidxplosion@gmail.com

DATE:\_\_\_

This application is not an employment contract, but it is limited to evaluate suitability for employment. Kid X-plosion, LLC is an equal opportunity employer, without discrimination on the basis of sex, race, color, religion, age, amrital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. Kid X-plosion, LLC reserves the right to conduct preemployment screening before a job offer is made. If an offer is made, employment may contingent upon successful completion of a medical examination, which may include providing body substance samples.

#### PERSONAL INFORMATION

Last			First		Middle	
PRESENT AD	DRESS:					
	Street			City	State	Zip
LENGTH OF	TIME AT THIS AI	DDRESS:	SOCIAL S	SECURITY #:		
D.O.B:	E-MA	L ADDRESS:				
PHONE:				Are you 18 y	vears or older?	yesno
REFERRED B	Y:					
EMPLOYME	NT DESIRED					
	PLYING FOR: EACHER T	EACHER AIDE_	SUBSTIT	UTE SU	JPPORT STAFF _	
PREFERRED	AGE GROUP(S):	INFANTS	TODDLERS	PRESCHOO	DL PRIMAR	RY
WHEN CAN Y	OU START?		SALA	ARY DESIRED	·	
ARE YOU EM	PLOYED NOW?		If so, may we in	nquire of your p	present employer?	
KID X-PLOSI Are you interes		<b>om 7AM - 10PM</b> Time or F			<b>T, SUN (APPT O</b> ck)	NLY)
Please indicate	your willingness t	o work:				
	OPENING	MORNING	AFTERN	100N	CLOSING	-
	lling to month or out	ime when necessa	ry?			
Will you be wi	ining to work overt					
•	w the hours you ar	e available to wor	k:			
•	w the hours you ar	e available to wor <b>Wednesday</b>	k: Thursday	Friday	Saturday	Sunday

### CERTIFICATION

DO YOU POSSES A VALID TEACHING CERTIFICATE? \_\_\_\_\_\_ \*\*Please attach a copy of your certificate.

CERTIFICATE #:\_\_\_\_\_ RENEWAL DATE:\_\_\_\_\_ STATE:\_\_\_\_\_

IN WHAT AREAS ARE YOU CERTIFIED TO TEACH?

Kid X-plosion, LLC. Created March 2020

Type of School	Name of School	# of years	Did you	Subjects Studied/Degree Obtained
		attended	graduate?	
High School				
0				
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College/University				
Other- Special				
Schools,				
Education and				
Training				
Total years experience teaching or childcare: Grade Level(s) taught:				

### **EDUCATION**

List any licenses, certificates, trainings, or professional achievements that would support your application.

VOLUNTEER WORK:\_

## **PREVIOUS EMPLOYMENT**

Month/Year	Name and Address of	Position	Salary	Reason for Leaving	Phone Number
	Employer				

### REFERENCES

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 5 YEARS.

Name	Address	Business	Yrs Acquainted	Phone Number

PHYSICAL RECORD	Do you have any physical condition, which may limit your ability to perform the job for which you are being considered?				
YesNoIf yes explan:					
IN CASE OF EMERGENCY NOTIFY:					

	Name	Address	Phone
Have you ever been arrested or convid if yes explain:			
I CERTIFY THAT THE FACTS CON BEST OF MY KNOWLEDGE AND APPLICATION SHALL BE GROUN I AUTHORIZE INVESTIGATION O LISTED ABOVE TO GIVE YOU AN ANY PERTINENT INFORMATION PARTIES FROM LIABILITY FOR A I UNDERSTAND AND AGREE TH MAY, REGARDLESS OF THE DAT ANY TIME WITHOUT PRIOR NOT	UNDERSTAND T IDS FOR DISMISS F ALL STATEME VY INFORMATION THAN MAY HAV ANY DAMAGE TH AT, IF HIRED, MY E OF PAYMENT	HAT IF EMPLOYED, FALS AL. NTS CONTAINED HEREIN N CONCERNING MY PREV 'E, PERSONAL OR OTHER' IAT MAY RESULT FROM F ' EMPLOYMENT IS FOR NO	IFIED STATEMENTS ON THIS AND THE REFERENCES IOUS EMPLOYMENT AND WISE AND RELEASE ALL FURNISHING SAME TO YOU. D DEFINITE PERIOD AND
Date: Si	gnature:		
For office only: INTERVIEWED BY: RESPONSIBILITIES:	_HIRED?	POSITON:	SALARY: