

# Application for Employment

Day Care Resources, Inc.

P.O. Box 1103

Tremont, IL 61568

Equal access to programs, service and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should notify a representative.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_\_

Name \_\_\_\_\_  

Last
First
Middle

Address \_\_\_\_\_  

Street
City
State
Zip Code

Home # \_\_\_\_\_ Cell # /Other # \_\_\_\_\_ Social Security # \_\_\_\_\_

If you are under 18, and it is required, can you furnish a work permit? -----  Yes or  No  
 If no, please explain \_\_\_\_\_

Have you ever been employed here before? -----  Yes or  No

Are you legally eligible for employment in this country? -----  Yes or  No

Date available for work: \_\_\_\_\_ Type of employment desired:  Full-Time |  Part-Time

Are you able to attend work on a regular basis? (Mon-Fri) -----  Yes or  No

Have you been convicted of a crime in the last seven (7) years? -----  Yes or  No

If yes, please explain \_\_\_\_\_

Conviction will not necessarily be a bar to employment. Each sentence and explanation will be considered in relation to the position for which you are applying.

Do you have a valid driver's license?  Yes or  No Driver's license # \_\_\_\_\_ state \_\_\_\_\_

Are you willing to travel as a main part of your job duties? (Most travel will be within 1 hour or less)  Yes or  No

**Employment History:** Provide your past four (4) employers, assignments/volunteer activities, starting with the most recent.

From	To	Employer	Phone #
Job Title		Nature of Work/Responsibilities	
Supervisor & Title		Address	
Reason for Leaving			

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Job Title		Nature of Work/Responsibilities	
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Supervisor & Title		Address	
Reason for Leaving			

**Skills and Qualifications**

Do you have experience with Microsoft office products, such as Word or Excel? -----  Yes or  No

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

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**Educational Background**

Name and Location	Years Completed	Did You Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

**References**

Name	Telephone #	Years Known

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation on this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and it's representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis by local, state, or federal law.

This application is current for only 60 days, at the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, have the authority to make any assurances to the contrary, I further understand that any such assurance must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accomodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_