

Little Apples Daycare Center
 225 West Apple Street
 Grantsville, UT 84029
 435-830-0907
LittleApples2014@gmail.com



Child Care Employment Application

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE NAME	POSITION APPLYING

COMPLETE ADDRESS

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PRIMARY CONTACT NO.	SECONDARY CONTACT NO.	EMAIL ADDRESS

If Classroom Position, Age Group Preferences (if any)

<input type="checkbox"/> No Preference	<input type="checkbox"/> Infants / Toddlers	<input type="checkbox"/> Two's / Three's
<input type="checkbox"/> Pre-School	<input type="checkbox"/> Multi-Age	<input type="checkbox"/> School-Age

Would you prefer: ☐ Full Time ☐ Part Time ☐ No Preference

If Part Time: ☐ AM ☐ PM

Have you ever filed an application with us before? ☐ Yes ☐ No

If Yes, give date of application: _____

Have you ever been employed with us before? ☐ Yes ☐ No

On what date would you be available to start working: _____

Have you ever been convicted of a crime other than a minor traffic incident? ☐ Yes ☐ No

If Yes, please explain:

Not applicable

WORK EXPERIENCES SIMILAR TO POSITION APPLYING FOR *(Last 3 latest only)*

Company	Date (Year)		Reason for Leaving
	From	To	

EDUCATION *(most recent)*

Level	School	Date (Year)		Degree
		From	To	

References: _____ Name _____ Number _____