

# New Bethlehem Learning Center, LLC Application for Employment

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If so, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

CPR Cert. \_\_\_\_\_ First Aid Cert. \_\_\_\_\_ Other Certificates \_\_\_\_\_

## References

*Please list three professional references, not related to you.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

# New Bethlehem Learning Center, LLC Application for Employment

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# New Bethlehem Learning Center, LLC Application for Employment

1. DO YOU HAVE RELIABLE TRANSPORTATION? \_\_\_\_\_
2. WHAT IS YOUR D.O.B.? \_\_\_\_\_
3. DO YOU HAVE A DRIVER'S LICENSE? \_\_\_\_\_
4. DO YOU HAVE ANYTHING CRIMINAL IN YOUR PAST THAT WOULD PREVENT YOU FROM WORKING WITH CHILDREN? \_\_\_\_\_
5. CAN YOU DRIVE A 15 PASSENGER VAN? IF NOT, WOULD YOU BE WILLING TO LEARN? \_\_\_\_\_
6. DO YOU HAVE A CDL TO DRIVE A BUS? IF NOT, WOULD YOU BE WILLING TO LEARN? \_\_\_\_\_
8. ARE YOU CURRENTLY CPR OR FIRST AID TRAINED? ARE YOU WILLING TO TAKE A CPR/FIRST AID COURSE? \_\_\_\_\_
9. ARE YOU A CERTIFIED LIFE GUARD? WOULD YOU BE WILLING TO BECOME CERTIFIED AS A LIFE GUARD? \_\_\_\_\_
10. CAN YOU BRING YOUR LUNCH TO WORK WITH YOU EVERY DAY? \_\_\_\_\_
11. DO YOU HAVE ANY CHILDREN? \_\_\_\_\_ IF SO, DO THEY NEED DAYCARE PROVIDED BY NEW BETHLEHEM LEARNING CENTER  
CHILDCARE? \_\_\_\_\_
13. DO YOU HAVE ANY MEDICAL CONCERNS THAT WOULD KEEP YOU FROM DOING YOUR JOB? \_\_\_\_\_
16. WHEN WOULD YOU LIKE TO WORK? CIRCLE ONE: MORNING, MID-DAY, AFTERNOON, OR ANYTIME.
17. CAN YOU PROVIDE 2 WEEKS NOTICE BEFORE TAKING A DAY OFF? \_\_\_\_\_ DO YOU UNDERSTAND THAT NEW BETHLEHEM LEARNING CENTER CHILDCARE MAY NOT BE ABLE TO GRANT YOUR REQUEST? \_\_\_\_\_
18. CAN YOU REARRANGE YOUR PERSONAL SCHEDULE SO THAT IT DOESN'T INTERFERE WITH YOUR WORK AT NEW BETHLEHEM LEARNING CENTER CHILDCARE? EXAMPLE: DOCTOR'S APPOINTMENT, CAR TUNE-UPS, AND SCHOOL RELATED ACTIVITIES. \_\_\_\_\_
19. ARE THERE ANY DAYS YOU KNOW THAT YOU WILL BE UNABLE TO WORK? EXAMPLE: UPCOMING VACATION, OR TRIP. \_\_\_\_\_
20. HOW MANY HOURS DO YOU WANT TO WORK EVERY WEEK? \_\_\_\_\_
24. WOULD YOU LIKE TO WORK WITH BABIES, TODDLERS, PRE-K, SCHOOLERS, OR NO PREFERENCE? \_\_\_\_\_
32. CAN YOU ATTEND A MINIMUM STANDARD TRAINING COURSE? \_\_\_\_\_

## New Bethlehem Learning Center, LLC Application for Employment

33. ARE YOU WILLING TO DO MONTHLY TRAINING TO IMPROVE YOUR QUALIFICATIONS AS AN EMPLOYEE.

\_\_\_\_\_

34. CAN YOU PURCHASE 3 STAFF SHIRTS AT A COST OF \$8 EACH? THIS CAN BE TAKEN OUT OF YOUR FIRST CHECK. \_\_\_\_\_

35. CAN YOU PAY THE COST OF CRIMINAL BACKGROUND CHECK AND FBI CHECK (YOUR COST: \$41.45)? THIS CAN BE TAKEN OUT OF YOUR FIRST CHECK. \_\_\_\_\_

36. CAN YOU PAY THE COST OF YOUR 1ST AID & CPR? (AROUND \$30) \_\_\_\_\_

38. WHAT IS 15% OF 40? \_\_\_\_\_

39. GIVE 3 SENTENCES EXPLAINING WHY YOU WOULD BE THE BEST PERSON FOR THIS JOB.

40. ARE YOU OK WITH RANDOM DRUG TESTS?