Craig Child P.O. Box 296*Craig*AK*999 Phone(907)826-3228* Fax (9 craigchildcare@gmail.com	21		ente	r			
Employment Application		А	re you 18 or (older?	DOB	_!!_	
	Арг	olicant	Information	1			
Full Name:	Eire			M.I.	Date:		
	FIIS	52		WI.1.			
Address:				1		- 0.0	
Mail Address:							
Phone:			Email				
Date Available:	Social Securit				red Salary: <u>\$</u>		
Position Applied for:							
Are you a citizen of the United States	YES	NO	lf no, are yo	u authorized to	work in the U.S	YES N 6.? □ [10
Have you ever worked for this compa	YES any? □		If yes, when	?			
Have you ever been convicted of a fe	YES elony?						
If yes, explain:							
		Educ	ation				
High School:		Address	:				
From: To:	Did you gi	raduate?	YES NO	Diploma::			
College:		Address	:				
From: To:	Did you gi	raduate?	YES NO	Degree:			
Other:	/	Address					
From: To:	Did you gr	aduate?	YES NO	Degree:			

References

essional references.			
			Relationship:
			Phone:
		in the second second	
			Relationship:
			Phone:
			Relationship:
			Phone:
Previous E	Employme	ənt	
			Phone:
•			Supervisor:
Starting S	Salary: <u>\$</u>		Ending Salary:
То:	Reason f	or Leaving:	
revious supervisor for a reference?	YES		
			Phone:
			Supervisor:
Starting Salary:		Ending Salary: \$	
То:	Reason fo	or Leaving:	
revious supervisor for a reference?	YES	NO	
	Previous E To: Starting S To: Starting S To: Starting S	Previous EmploymeStarting Salary:\$To:Reason for revious supervisor for a reference?	

PERSONAL HISTORY

Have yo	bu been	previously	licensed to	care fo	r child(ren)) or adults?
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NO YES If yes, indicate city, state and type of care (child care home, child or adult foster care, etc.) and dates of licensure:

Have you	ever had a license to care for children or adults revoked or denied in Alaska or any other state?
NO 🗌	YES If yes, attach an explanation

Have you ever been investigated for child or elder abuse or neglect?

NO YES If yes, attach an explanation.

Do you have any physical, health, mental health or behavioral problem that might pose a significant risk to the health, safety, or well-being of children or adults?

NO YES If yes, attach an explanation.

Do you have a domestic violence problem or an alcohol or other substance abuse problem that might pose a significant risk to the health, safety or well-being of children?

NO YES If yes, attach an explanation.

Have you been convicted of a crime or charged with a criminal offense in the last 10 years?

NO YES If yes, attach an explanation.

Have you ever been convicted of or charged with a felony, crime involving domestic violence, or a sex crime? NO _____YES ___ If yes, attach an explanation.

I certify that the contents of this form and information provided with it are true, accurate, and complete. I authorize the employer to contact persons listed as references and I understand that the employer may contact others to verify information contained here.

Signature

Date

Craig Child Care Center P.O. Box 296 Craig, Alaska 99921 (907) 826-3228

To:

This is a letter of reference is for:

This person has applied for a position at Craig Child Care Center and has given your name as a reference. Please fill out this form and return to Craig Child Care Center.

- 1. How long have you known this person and in what capacity?
- 2. Can this person work successfully with children and be a positive role model for children? Please describe abilities, training, employment, that would help show how this person works well with children
- 3. Does this person have a good character and uses good judgment? Please give examples
- 4. Does this person discipline children in a way that is firm but fair? Please give examples
- 5. How would you feel about leaving your child in this person's care?

To the best of your knowledge has this person: (answer yes or no)

- 6. Ever abused or neglected a child?
- 7. Have a physical, health, mental health, or behavior problem that might be a risk to children?
- 8. Have a domestic violence or substance abuse problem that might be a risk to children?

9. Been under indictment for or convicted of a crime? If you answer yes to any of these, please explain

10. Other comments

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Signature _____ Date_____

Phone_____