



Application for Employment

Stepping Stones Learning Center (SSLC) is an Equal Opportunity Employer. Federal and State laws prohibit discrimination in employment because of gender, age, race, color, religion, marital status, sexual orientation, national origin, citizenship, veteran status, disability, arrest records, genetic predisposition of carrier status, political activities and legal activities conducted outside of work hours.

PERSONAL INFORMATION

Name (Last)	(First)	(Middle)
Present Address (Street)	(City)	(State) (Zip)
Permanent Address (if different) (Street)	(City)	(State) (Zip)
Home Telephone ()	Mobile Phone ()	
E-mail address:		
Are you either a U.S. citizen or an alien who has the legal right to remain and work in the U.S.? (You will be required to furnish proof of lawful work status if you are extended a job offer) <input type="checkbox"/> YES <input type="checkbox"/> NO		
Have you ever been convicted of a crime? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, please describe fully the criminal conviction(s), listing the nature of the offense, your age at the time of the offense, and your rehabilitation since the conviction(s). A conviction record will not necessarily be a bar to employment.		

DESIRED EMPLOYMENT

Position applied for:	Seeking (Check all applicable): <input type="checkbox"/> Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Per Diem	Please list total hours per week you are seeking:
Certifications/Licenses currently held:	Certificate/License number(s):	Expiration date:
Are there any days or hours you would be unable to work? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please specify those days/hours:		Salary Desired:
Have you ever applied to our agency before? <input type="checkbox"/> YES <input type="checkbox"/> NO		If Yes, when and for what position?
Have you ever worked for Stepping Stones Learning Center before? <input type="checkbox"/> YES <input type="checkbox"/> NO	If Yes, Position held:	If Yes, Reason for leaving:
How did you hear about this opportunity (be specific)?		Date available to start employment:

EMPLOYMENT HISTORY (continued)

Dates employed		Employer Name			
From:	To:				
Job Title		Employer Street Address	City	State	Zip
Name of last Supervisor		Title	Phone number		
May we contact for a reference? ___ YES ___ NO					
Summarize the nature of work performed and job duties:					
Reason for Leaving		Beginning Rate/Salary	Final Rate/Salary		
		\$ _____ per _____	\$ _____ per _____		

Dates employed		Employer Name			
From:	To:				
Job Title		Employer Street Address	City	State	Zip
Name of last Supervisor		Title	Phone number		
May we contact for a reference? ___ YES ___ NO					
Summarize the nature of work performed and job duties:					
Reason for Leaving		Beginning Rate/Salary	Final Rate/Salary		
		\$ _____ per _____	\$ _____ per _____		

Dates employed		Employer Name			
From:	To:				
Job Title		Employer Street Address	City	State	Zip
Name of last Supervisor		Title	Phone number		
May we contact for a reference? ___ YES ___ NO					
Summarize the nature of work performed and job duties:					
Reason for Leaving		Beginning Rate/Salary	Final Rate/Salary		
		\$ _____ per _____	\$ _____ per _____		

If additional space is needed for employment history, please attach a separate piece of paper.

REFERENCES

If you worked in any of your previous positions under another name, please give the name(s) below (for reference checking purposes):

Name: _____ @ Company: _____

Name: _____ @ Company: _____

Please provide three (3) professional references that are not related to you. If not applicable, please provide three (3) school or personal references that are not related to you.

Name	Primary Phone Number	Alternate Phone Number
Employer and Job Title:		Relationship (ex.: former supervisor):
		No. of Years Known:

Name	Primary Phone Number	Alternate Phone Number
Employer and Job Title:		Relationship (ex.: former supervisor):
		No. of Years Known:

Name	Primary Phone Number	Alternate Phone Number
Employer and Job Title:		Relationship (ex.: former supervisor):
		No. of Years Known:

APPLICANT STATEMENT

I certify that my answers to the forgoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed any false, misleading or otherwise incorrect statements made on this application form may be grounds for immediate dismissal.

I hereby authorize the agency to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. I hereby release the agency and such references and prior employers from any and all liability with respect to such disclosures.

If employed, I will abide by the agency's rules and regulations, which I understand are subject to change by the agency. I understand that my employment may be terminated with our without cause of notice, at any time, at either my option or that of Stepping Stones Learning Center (SSLC). I further understand that nobody in the agency has any authority to enter into any written or verbal agreement for continuing employment for any specific period of time of which is contrary to the foregoing without written approval of the President of the agency.

Applicant's Signature

Date
