



Action Day Primary Plus

PRIVATE INFANT CARE · PRESCHOOL · ELEMENTARY · MIDDLE SCHOOL

Date: _____

PERSONAL INFORMATION	Last Name	First	Middle	Email:
	Street Address			Phone(s): () () cell
	City, State, Zip			Social Security #
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____ Location _____			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you legally eligible for employment in the United States?			When will you be available to work?
	Position Desired	Full Time or Part Time		Desired Pay
	Are you applying for temporary work, e.g., summer or holiday work? ____ Yes ____ No If yes, during what period of time will you be available?			
	What days and hours are you available to work?			
	How were you referred to Action Day/Primary Plus, Inc.? Relative, or employee of ADN/PP (state name and relationship) _____ Newspaper__ Yellow Pages__ College Postings__ Walk-in__ Other _____			
	If hired, would you have a reliable means of transportation? ____ Yes ____ No			
	Are you able to perform the essential functions of the job for which you are applying? ____ Yes ____ No If no, describe the functions that cannot be performed:			

EDUCATION	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
	Graduate				<input type="checkbox"/> YES <input type="checkbox"/> NO	
	College				<input type="checkbox"/> YES <input type="checkbox"/> NO	
	Business/ Trade/Technical				<input type="checkbox"/> YES <input type="checkbox"/> NO	
	High School				<input type="checkbox"/> YES <input type="checkbox"/> NO	
	Elementary				<input type="checkbox"/> YES <input type="checkbox"/> NO	

What languages do you speak and write fluently _____

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. Attach Resume if available.

1	Company Name	Telephone ()
	Address	Employed- (state month and year) From To
	Name of Supervisor	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for leaving

2	Company Name	Telephone ()
	Address	Employed- (state month and year) From To
	Name of Supervisor	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for leaving

3	Company Name	Telephone ()
	Address	Employed- (state month and year) From To
	Name of Supervisor	Weekly pay Start Last
	State Job Title and Describe Your Work	Reason for leaving

List specific work experiences you have had with children:

Name of Facility	City	Age of Children	Position	From	To	Reason for Leaving
1.						
2.						
3.						

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT
	Employee Number(s) _____ Reason _____ _____

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? ____ Yes ____ No If "Yes," describe in full.

TEACHING EXPERIENCE	Check any Early Childhood Education Courses you have taken covering the equivalent of the following:				
	Child Growth and Development		Program Curriculum II		Administration
	Child, Family, and Community		Infant/Toddler Development		Health and Safety
	Program Curriculum I		School Age Development		Other?
	Total # of Quarter ECE Units		Total # of Semester ECE units		
	Do you have a currently valid Teaching Credential?				
	What state issued it?	Year issued	K-8	Secondary	Other
	AA child Care Education Degree		BA/ BS Child Care Degree		
	Special Talents				

BACKGROUND INFORMATION: What are your subjects of special interest? _____

List membership in Professional or Civic organizations: _____

List administrative and /or supervisory responsibilities: _____

Why do you want to work for Action Day Nurseries/ Primary Plus, Inc.? _____

SIGNATURE	The information in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.	
	I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.	
	If you decide to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.	
	_____	_____
	Date	Signature

Action Day/Primary Plus, Inc. is an Equal Opportunity Employer. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

FOR EMPLOYER'S USE ONLY

REFERENCE CHECK	Employer	Person Contacted	Results
	<i>1</i>		
	<i>2</i>		
	<i>3</i>		
	<i>4</i>		

Interviewed by _____ Date _____ Position _____

INTERVIEW RESULTS	Interviewer Comments

EQUAL EMPLOYMENT OPPORTUNITY

Date: _____

To be completed by applicant:

Completion of this form is entirely voluntary, and all information will remain confidential and will not affect your application for employment. We are collecting this information for equal opportunity employment purposes, and it will not become part of your personnel record if you are hired by this company.

Name: _____

Sex: Male Female

Race/Ethnicity:

- American Indian or Alaskan Native Asian White
- Black or African-American Hispanic or Latino
- Native Hawaiian or other Pacific Islander Two or more races

Race and ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. Definitions of the race and ethnicity categories are as follows:

Hispanic or Latino A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) All persons who identify with more than one of the above five races.

To be completed by employer:

EEO-1 Category:

- 1a. Executive/Senior Level Officials and Managers
- 1b. First/Mid Senior Level Officials and Managers (Directors)
2. Professionals (Academic and ECE Teachers)
3. Technicians
4. Sales
5. Administrative Support Workers (Asst. Directors, Office Support)
6. Craft Workers and Managers
7. Operatives - semi-skilled
8. Laborers and Helpers
9. Service Workers (Teacher Aides)

Employer information completed by: _____

Name

Date