

INSTRUCTIONS: It is important that you fill out all sections of this application completely & to the best of your ability. Your application will be used as part of the hiring process &, therefore, should represent your best effort.

Current Information (Please)	orint clearly in ink)		
Position Applied For	Date		
When will you be available f	or employment?		
NAME			
Last	First	Middle	
ADDRESS			
Street & No	City	State	Zip
TELEPHONE			
Home	Cell		
EMAIL ADDRESS			
General Information (Attach	additional sheet if needed)		
Yes No If yes, please explain when,	where, & disposition of case.		
Drivers License Information:			
License Number	Class	Expiration Date _	
References			
knowledge of your qualifica	rives. We recommend listing persons such as co tions for the position for which you are applying erences, so we recommend that you let your re	g. DCF does require that w	e personally
Name	Address	Phone	
Name	Address	Phone	
Name	Address	Phone	

Other Questions: Please list the days & hours you are available to work: _____ Desired Salary: _____ (please give a real number, i.e. not "negotiable", etc.) Do you have any personal responsibilities or problems that may affect your daily attendance? If yes, explain: Please tell us about yourself: Please tell us about your experiences working with children & what ages: ______ Do you look at this job as being long-term or temporary? _____ Please tell us why you would like to work with children: _____ What do you like most about working in childcare? _____ What do you like least about working in childcare? _____ What is your favorite age of children to work with? Why? _____ Have you ever taught or assisted with teaching preschool (i.e. circle time, lessons from curriculum)? If so, please describe your experience. In your past work experience, how many children have you cared for alone and what ages? Briefly explain your philosophy on <u>disciplining</u> children. _____ Briefly explain your philosophy on educating children. ______

How do you respond to:	
a child who is having a temper tantrum?	
	ving)?
a child who continually disrupts circle time?	
a child who is having trouble separating from p	arent at drop-off time (upset, crying, clinging, etc.)?
a child who is having difficulty learning a skill or	concept?
Describe a time when you had to handle an en	nergency or injury with a child.
What elements do you think make up a quality	daycare?
will also be required to have a current CPR/First Aid	g within the first 90 days, plus 10 hours of in-service training each year after. You Certificate as well. Do you understand that you will be responsible for acquiring if any) of this training, and that the training must be completed on your own
	Tier II Background screening and drug screening that you will be responsible for e responsible for the costs of these screenings Yes (initial)
Please read & sign the statement below.	
	ne information given truly represents my background & experience. I or falsified any of the application information I may be disqualified for yment.
	y information regarding my employment, together with any information ereby release them from any damage whatsoever for issuing same. I also permit f me.
Signature	Date