

Sheridan Child Development Center Application

Personal Information

Name (first, middle, last) _____

DOB _____ / _____ / _____ Social Security Number _____ / _____ / _____

Address _____

City _____ State _____ Zip Code _____

Cell Number _____ Home Number _____

Position that you are applying for _____

Are you at least 18 years old? Yes No If no, when will your be 18? _____

Education

High School _____

Town _____ Years Attended _____ - _____

Did you graduate? Yes No Still Attending

Expected Date of Graduation [mo/yr]? _____

College or Trade School _____

Town _____ Years Attended _____ - _____

Did you graduate? Yes No Still Attending

Expected Date of Graduation [mo/yr]? _____

Skills that apply to this position- List any experiences, training that you feel would qualify you to work at Sheridan Child Development Center...

Are you currently certified in CPR? Yes No

Are you currently certified in First Aid? Yes No

Are you legal to work in the United States? Yes No

Where did you hear about SCDC or this position opening?

Daily Nebraskan/UNL Lincoln Journal Star NE Workforce Friend

Employee _____

Other _____

References

Name _____ Number _____

Relationship _____

Name _____ Number _____

Relationship _____

Name _____ Number _____

Relationship _____

Past Job Experiences [please list from most recent and so on]

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

Starting Pay _____ Ending Pay _____

Reason for leaving _____

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

Starting Pay _____ Ending Pay _____

Reason for leaving _____

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

Starting Pay _____ Ending Pay _____

Reason for leaving _____