

**APPLICATION FOR EMPLOYMENT  
IN A CHILD CARE FACILITY**

**ABC Child Care & Learning Center**

*Instructions: All information on this application must be truthful and correct. Falsification or misrepresentation on the application is cause for immediate dismissal.*

Applicant's Name (please print)

Address

County

City

Zip

Phone Number: ( ) \_\_\_\_\_ Citizenship: \_\_\_ USA \_\_\_\_\_ Other

D.O.B: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Position for which you are applying and any qualifications:

**Emergency Contact Information:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please answer the following questions:

1. Have you ever held a child care license with the Department of Children and Families or been registered to provide child care in your home?

**subject of disciplinary action, or been the part responsible for a child care facility receiving an administrative fine or other disciplinary action?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

2. **While employed in a child care program, have you ever been the**

\_\_\_\_\_ Yes \_\_\_\_\_ No

