



Wishing Well Preschool & Childcare
632 Old Indian Trail, DeForest WI
(608) 846-9898

APPLICATION FOR EMPLOYMENT

Name: _____

Address: _____ City _____ State _____

Phone Number _____ Cell Phone _____

Position Applying for: _____

Full-Time
 Part-Time
 Summer Only

Date available to start, if considered? _____

Comments: _____

EDUCATION

	Name and Address of School	Course of Study	Total Years of Study	Degree/ Diploma
High School				
Undergraduate College				
Graduate/ Professional				
Other Specify				

List any seminars, classes, or other education not listed above which may help qualify you for this position: _____

Membership(s) in Professional Organizations: _____

EMPLOYMENT HISTORY

List below all present and past employers over the past seven years, starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if you are attaching a resume. May we contact your current employer? Yes No

1. Most current employer

Employer (current: Yes No)		Start Date	Leave Date	Essential job functions of final position
Address				1.
City, State, Zip		Starting Salary	Ending Salary	2.
Phone Number				3.
Job position(s)	Supervisor			4.
Reason for leaving				
What value did you add to this company or its customers?				

Employer (current: Yes No)		Start Date	Leave Date	Essential job functions of final position
Address				1.
City, State, Zip		Starting Salary	Ending Salary	2.
Phone Number				3.
Job position(s)	Supervisor			4.
Reason for leaving				
What value did you add to this company or its customers?				

ADDITIONAL INFORMATION

List any professional, trade, business or civic activities and offices held. (You may exclude membership that would reveal gender, race, religion, national origin ancestry, age, disability or any other protected status)

REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last five years.

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship and years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship and years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Occupation

ADDITIONAL SPACE

Additional space provided to expand on any points or questions asked previously in this application.

Please read each statement closely and initial each acknowledging your understanding

Complete and Accurate Information

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure

employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Testing Authorization

_____ If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of my employment.

Investigation Authorization

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

I have read and understand the above policy statements and agree to be bound by them if employed by Wishing Well Preschool and Childcare.

Signature

Date