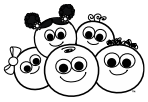

Kinder Academy, Inc.
7332 Elgin Avenue, Philadelphia, PA 19111

Employment Application

PLEASE PRINT AND COMPLETE ALL SECTIONS

Today's Date: _____

Name

Full Name: _____
Last *First* *M.I.*

Employment Desired

Job Applying for: _____ Full time ☐ Part time ☐ Temporary ☐

Salary Desired: **$** _____ Date Available: _____

Personal

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: **( )** _____ E-mail Address: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

If hired, can you furnish proof of eligibility? YES ☐ NO ☐ Are you 18 years or older? YES ☐ NO ☐

Can you perform the essential function of the position for which you are applying? YES ☐ NO ☐

Have you ever worked or attended school under another name? YES ☐ NO ☐

If yes, give details. _____

Have you ever worked for this organization? YES ☐ NO ☐ If yes, when? _____

Have you ever applied here before? YES ☐ NO ☐ If yes, when? _____

Are you presently employed? YES ☐ NO ☐

If yes, may we contact your current employer for a reference? YES ☐ NO ☐

Have you ever been fired or asked to resign from a job? YES ☐ NO ☐

Have you ever been convicted of a felony violation? YES ☐ NO ☐

If yes, give details.

_____

If employed by us, do you expect to be employed elsewhere? YES ☐ NO ☐

If yes, give details. _____

Education (verification required)

High School or GED: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Vocational or Technical: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

College or University: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Graduate School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Do you have other skills or training that would be helpful for the job? If yes, please explain.

_____

Employment History

Please list employers starting with the current or most recent.
A job offer may be contingent on acceptable references from employers.
Please explain gaps in employment.

Name of Employer: _____ Phone: **( )** _____

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Supervisor's Name: _____ Title: _____

Phone: **( )** _____ Email: _____

Job Title: _____ Ending Salary: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Name of Employer: _____ Phone: ( ) _____

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Supervisor's Name: _____ Title: _____

Phone: ( ) Email:

Job Title: Ending Salary: $

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Name of Employer: Phone: ( )

Address:

Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Supervisor's Name: Title:

Phone: ( ) Email:

Job Title: Ending Salary: $

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Name of Employer: Phone: ( )

Address:

Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Supervisor's Name: Title:

Phone: ( ) Email:

Job Title: Ending Salary: $

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Gaps in Employment:

Volunteer Activities and Professional Memberships

Organization Name: Title:

Responsibilities: _____ Years Active: _____

Organization Name: _____ Title: _____

Responsibilities: _____ Years Active: _____

Applicants Must Provide Two Written References at Time of Employment

Reference Name: _____ Staff Initials: _____

Relationship to Applicant: _____ Verified: YES ☐ NO ☐

Reference Name: _____ Staff Initials: _____

Relationship to Applicant: _____ Verified: YES ☐ NO ☐

Certification

I hereby certify that all the information provided in this employment application is true and complete. I understand that false information or the omission of information may disqualify my candidacy and may be grounds for termination. I further understand that I am applying to a Drug Free Workplace and may be required to submit to testing for the presence of drugs as a condition for employment.

Signature: _____ Date: _____