

LITTLE LEGENDS LEARNING ACADEMY, LLC.

947 Park Ave.

Murfreesboro, TN 37129

Job Application Form

Full Legal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Applying For: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Desired Salary: \_\_\_\_\_\_\_\_\_

Date Available to Start: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fulltime/ Part time/ Closer (circle one)

Available for Overtime if needed? \_\_\_\_\_\_

Days Available: Monday\_\_\_\_ Wednesday\_\_\_\_ Friday\_\_\_\_

 Tuesday\_\_\_\_ Thursday\_\_\_\_\_

Hours Available: Monday\_\_\_\_\_\_\_\_\_\_ Wednesday\_\_\_\_\_\_\_\_ Friday\_\_\_\_\_\_\_\_\_

 Tuesday\_\_\_\_\_\_\_\_\_\_ Thursday\_\_\_\_\_\_\_\_

Are you at least 18 years of age or older? \_\_\_\_\_\_\_\_\_

Are you CPR and First Aid Certified? \_\_\_\_\_\_\_

Are you willing to undergo a background check in accordance with state law and regulations? \_\_\_\_\_\_

Are you willing to undergo a drug test? \_\_\_\_\_\_\_\_

Have you worked outside the state of Tennessee in the past 5 years?\_\_\_\_\_\_

 If yes, where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCES

Give 3 references of people who are not related to you

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Phone** |
| 1) |  |  |
| 2) |  |  |
| 3) |  |  |

Do you have any experience working with young children? \_\_\_\_

 If yes, explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Previous Employment

List the last 3 employers starting with the most recent

1)Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Pay:\_\_\_\_\_\_\_ End Pay:\_\_\_\_\_\_\_

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Description:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of Employment From:\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_

Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact this employer? \_\_\_\_\_\_\_\_

2)Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Pay:\_\_\_\_\_\_\_ End Pay:\_\_\_\_\_\_\_

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Description:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of Employment From:\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_

Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact this employer? \_\_\_\_\_\_\_

3)Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Pay:\_\_\_\_\_\_\_ End Pay:\_\_\_\_\_\_\_

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Description:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of Employment From:\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_

Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact this employer? \_\_\_\_\_\_\_

**Education**

Highest Level of Education completed (circle one)?

High School College/University

Technical Some College

Do you have any Early Childhood Education certification or a Degree? \_\_\_\_\_

 If so, please list below and provide copies to Directors

 Institute Name Certificate or Degree Year Completed

|  |  |  |
| --- | --- | --- |
| 1) |  |  |
| 2) |  |  |
| 3) |  |  |
| 4) |  |  |
| 5) |  |  |
| 6) |  |  |
| 7) |  |  |

Skills and Qualifications

|  |  |
| --- | --- |
| 1) | 2) |
| 3) | 4) |
| 5) | 6) |
| 7) | 8) |

I hereby acknowledge that all the information provided in this application is true, accurate, and complete to the best of my knowledge. I understand that any false information or omissions may result in the rejection of my application or termination of my involvement, should it be discovered at any point in the future.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_