

Application For Employment

Prime Time Children's and Youth Activity Center

(Nationally and State Accredited - Award Winning Child Care) *Prime Time...An equal opportunity employer*

Personal Information

Name: _____

Address: _____

Home Phone Number: _____ Social Security Number _____

Cell Phone _____ Email Address _____

Are you 16 years or older? Yes No Date of birth ____Month____Day____Year

Desired Employment

Position: _____ Date you can start _____

Days and hours you are available to work _____

Salary Desired: _____ Are you currently employed? Yes No

Age group preferred to work with _____

Have you ever been employed by Prime Time Children's Center? Yes No

Were you ever enrolled at Prime Time Children's Center? Yes No

Ages of children you would need care for if employed (if applicable) _____

Education

Please check all that you have received and fill in date of completion

High School _____ GED _____ College _____ AA Degree _____ Bachelor Degree _____

Masters Degree _____ Trade School _____ 90 hr. Senior Staff Course _____ Child Dev. I _____

Child Dev. II _____ Child Dev. III _____ 45 hr. Group Leader Course _____

45 hr. Infant and Toddler Care Course _____ CPR _____ First Aid _____

Special Needs Courses/Experience _____ Other _____

General Information

Subjects of special interest or other training: _____

Have you been convicted of a felony within the last 5 years? Yes No Explain _____

What are your career goals for the future? _____

Who can we thank for referring you to Prime Time? _____

Prime Time Children's and Youth Activity Center

Former Employers and Employment History

Name of present or last employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title _____

Weekly Starting Salary _____ Weekly Final Salary _____

May we contact your Supervisor? Yes No

Name of Supervisor _____

Title _____ Phone Number _____

Description of work _____

Reason for leaving _____

Name of previous employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title _____

Weekly Starting Salary _____ Weekly Final Salary _____

May we contact your Supervisor? Yes No

Name of Supervisor _____

Title _____ Phone Number _____

Description of work _____

Reason for leaving _____

Name of previous employer: _____

Address: _____

Starting Date: _____ Leaving Date: _____ Job Title _____

Weekly Starting Salary _____ Weekly Final Salary _____

May we contact your Supervisor? Yes No

Name of Supervisor _____

Title _____ Phone Number _____

Description of work _____

Reason for leaving _____

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References

Name _____ Years Known _____

Address _____ Phone _____

Name _____ Years Known _____

Address _____ Phone _____

Name _____ Years Known _____

Address _____ Phone _____

Additional Comments



I state the facts contained in this application are true and complete and to the best of my knowledge and that if I am employed by Prime Time, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above. If any of the information concerning my previous employment or any pertinent information personal or otherwise is false and I release the company from all liability for any damage that may result from lack of information.

I understand and agree that no representative of the Company has any authority to enter into any agreement for employment for any specified period of time.

Signature _____ Date _____



Prime Time Children's and Youth Activity Center
8816 Donald's Way
Owings, MD 20736
301-855-2221 or 301-855-2146