

Hope Lutheran Early Learning Center

Application for Employment

Date Received _____

Address:

East: 3560 Dempsey Road
Manhattan, KS 66502

West: 8385 E Hwy 24
Manhattan, KS 66502

Director: (785) 587-9400
Church: (785) 770-9656

Name _____ Social Security Number _____ - _____ - _____
First Middle Last

Permanent Address _____
Street City State Zip Code

Residence Phone Number (_____) _____ Work Phone Number (_____) _____

Best Time to Contact You at Home _____

Position Applying for _____ Date Available for Employment _____

Applying for _____ Full time position _____ Part-time position

As a condition of employment, and in compliance with Act 289, a comprehensive Background Information Disclosure will be conducted. This will be conducted for Kansas and any other states in which you have resided.

List previous states you have resided in since you were 18 and the dates you lived there:

State _____ Dates _____ State _____ Dates _____

*Have you been convicted of a crime within the last 10 years? Yes _____ No _____ If Yes, explain:

*Arrest or conviction of a crime is not an automatic bar to employment. Hope Lutheran Early Learning Center will review the nature of the offense, the date of the offense, and its relevancy to the position being applied for.

Educational History

Name/Address of School	Last Year Completed	Graduated?	Course of Study/Major/Degree
High School	9 10 11 12	Y N	
College/University <small>(attach transcripts & degree)</small>	1 2 3 4 5	Y N	
Graduate/Professional <small>(attach transcripts & degree)</small>	Masters/Doctorate	Y N	
Other		Y N	
CDA			

Summarize any job-related training, skills, licenses, certificates and/or other qualifications

Personal References

List three personal references (other than relatives) who have first-hand knowledge of your character, personality, and job-related skills:

Name _____ Profession _____

Address _____ Phone Number (____) _____

_____ co-worker _____ personal friend _____ other _____

Name _____ Profession _____

Address _____ Phone Number (____) _____

_____ co-worker _____ personal friend _____ other _____

Name _____ Profession _____

Address _____ Phone Number (____) _____

_____ co-worker _____ personal friend _____ other _____

Employment History

Start with your present/most recent job and list all paid jobs you have held.
Include military service. Add additional pages if necessary.

Employer _____ Location _____

City State

Supervisor _____ Phone Number (____) _____

Dates Employed: from _____ to _____ Beginning Wage _____ Ending Wage _____

Job Title and Duties _____

Ages of Children Supervised (if applicable) _____ Reason for Leaving _____

Employer _____ Location _____

City State

Supervisor _____ Phone Number (____) _____

Dates Employed: from _____ to _____ Beginning Wage _____ Ending Wage _____

Job Title and Duties _____

Ages of Children Supervised (if applicable) _____ Reason for Leaving _____

Employer _____ Location _____

City State

Supervisor _____ Phone Number (____) _____

Dates Employed: from _____ to _____ Beginning Wage _____ Ending Wage _____

Job Title and Duties _____

Ages of Children Supervised (if applicable) _____ Reason for Leaving _____

Employer _____ Location _____

City State

Supervisor _____ Phone Number (____) _____

Dates Employed: from _____ to _____ Beginning Wage _____ Ending Wage _____

Job Title and Duties _____

Ages of Children Supervised (if applicable) _____ Reason for Leaving _____

Is there any reason why we should not contact any of the supervisors listed for a reference? ____ Yes ____ No

If yes, please explain _____

Explain any gaps in employment:

I certify that all information I have provided in order to apply for and secure work with Hope Lutheran Early Learning Center is true, complete, and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in the application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

Acceptance, retention, or review of this application for employment by Hope Lutheran Early Learning Center does not guarantee that an applicant will be offered a job. Any misrepresentation or willful omission of facts by the applicant on this application will constitute sufficient cause to disqualify the applicant or immediately terminate the applicant's employment, whenever it is discovered. I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization

I also understand that if I am hired, I will be required to provide proof of 1) degree/certifications held, 2) other qualifications required, 3) identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in the regard.

I certify that I have read, fully understand, and accept all terms of the above statement.

Signature of Applicant

Date

Add by letter or resume any additional information that will give us a more complete estimate of your training, experience, character and ability. Emphasize your special preparation and training also your experience in extra curricular activities.

HOPE LUTHERAN EARLY LEARNING CENTER WORKERS' COMPENSATION

By law, employees injured in the course of employment are covered by Worker's Compensation Insurance. The program allows you to have medical expenses paid and to receive a portion of your lost wages as set by Kansas State law, as a result of an injury or illness arising out of your employment. Lost wages are not paid for the first three (3) days unless you are out of work 14 or more days. Then the first three (3) days of lost wages are paid retroactively. **All injuries, no matter how small must be reported immediately to your supervisor.** An incident report completed by you and your supervisor must be sent to the insurance company within 48 hours of the incident.

DRUG-FREE WORKPLACE POLICY

It is the purpose of Hope Lutheran Early Learning Center to help provide a safe and drug-free work environment for our employees. With this goal in mind and because of the serious drug abuse problem in today's workplace, we have established the following policy.

Hope Lutheran Early Learning Center is committed to a safe, healthy and productive work environment for all employees, free from the effects of drugs or alcohol. Use of drugs or alcohol alters employee judgement resulting in increased safety risks, employee injuries, and faulty decision-making. Therefore, the use, sale or possession of controlled substances or alcohol on Hope Lutheran Early Learning Center premises or during work time is strictly prohibited. Furthermore, employees are prohibited from reporting to work while under the influence of drugs or alcohol. Off-the-job drug or alcohol use that could adversely affect an employee's job performance or could jeopardize the safety of other employees, the public or Hope Lutheran Early Learning Center property is also cause for disciplinary action up to and including termination.

FAMILY MEDICAL LEAVE ACT POLICY

Employees of Hope Lutheran Early Learning Center are not eligible for Family Medical Leave under the FMLA as the act is applicable to those businesses with 50 or more employees.