



# KIDDY KOLLEGE CHILD CARE CENTER

## APPLICATION FOR EMPLOYMENT

1860 North Tyler Road – 383 North Country Acres Avenue – 13100 West 13<sup>th</sup> Street North – 1720 Osage Road-Derby  
Phone: (316) 201-4333 Fax: (316) 927-5707  
[www.KiddyKollege.com](http://www.KiddyKollege.com) Email: [info@kiddykollege.com](mailto:info@kiddykollege.com)

### APPLICANT INFORMATION

How were you referred to us? \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Position Applied for:  Director  Lead Teacher  Assistant Teacher  Substitute  Other: \_\_\_\_\_

Name (Last, First): \_\_\_\_\_ M.I.: \_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Cell Phone: (\_\_\_\_) \_\_\_\_\_  Cell  Home Cell Phone Provider: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Do speak any language other than English?  Yes  No if yes, please list: \_\_\_\_\_

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

Have you ever worked for this company?  Yes  No If so, when? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If yes, give dates and details: \_\_\_\_\_

*Answering "yes" to these questions does not constitute automatic rejection for employment. Date of offense, seriousness and nature of violation, rehabilitation, and position applied for will be considered*

Driver's License Number if applicable to position: \_\_\_\_\_ State: \_\_\_\_\_

### TRAINING AND SKILLS

#### Current Certification

*Proof of Certification is required. Please attach a photocopy of certification(s):*

Certification	Certification Date
<input type="checkbox"/> Pediatric CPR	
<input type="checkbox"/> Health Physical/Certificate	
<input type="checkbox"/> Child Abuse or Neglect	
<input type="checkbox"/> Basic Child Development	
<input type="checkbox"/> Childhood Illness	
<input type="checkbox"/> Hazardous Materials & Bio Contaminants	
<input type="checkbox"/> Emergency Preparedness in Childcare	
<input type="checkbox"/> Transportation of Children	

Certification	Certification Date
<input type="checkbox"/> Pediatric First Aid	
<input type="checkbox"/> Negative TB Skin Test	
<input type="checkbox"/> Head Trauma	
<input type="checkbox"/> Safe Sleep & SIDS	
<input type="checkbox"/> Administering Medication	
<input type="checkbox"/> Building & Physical Premises Safety	
<input type="checkbox"/> Prevention & Response to Emergencies – Food/Allergies	
<input type="checkbox"/> Other:	

Are you willing to attend trainings and professional development activities outside of regular working hours?  Yes  No

All of the above listed certifications are required, are you willing to obtain any certifications that you do not have?  Yes  No

### EDUCATION

#### Early Childhood Education

Do you have any semester hours in child development or early childhood education?  Yes  No *\*Transcript will be required*

Do you have a current CDA?  Yes  No if yes, for what age? \_\_\_\_\_

Do you have any teaching experience in a licensed **center** or **preschool**? *please do not count your own children*  Yes  No

If yes, please list total (YYMM) \_\_\_\_\_ Age groups you worked with  Infants  Toddlers  Pre-K  School Age

**Educational Record**

	Name and Address	Years Attended	Major Field of Study	Degree or Certificate Earned
<b>High School</b>		From: To:		Did you Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No Highest Level Completed
<b>College</b>		From: To:		Did you Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No Highest Level Completed
<b>College</b>		From: To:		Did you Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No Highest Level Completed
<b>Other</b>		From: To:		Did you Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No Highest Level Completed

**EMPLOYMENT RECORD**

*List below present and past employment, beginning with the most recent*

<b>Employer's name, address, and phone</b>	<b>Position/major Responsibilities</b>	<b>Dates Employed</b> From: _____ / _____ / _____ To: _____ / _____ / _____
	<b>Reason for Leaving</b>	<b>Supervisor's Name</b>
<b>Employer's name, address, and phone</b>	<b>Position/major Responsibilities</b>	<b>Dates Employed</b> From: _____ / _____ / _____ To: _____ / _____ / _____
	<b>Reason for Leaving</b>	<b>Supervisor's Name</b>
<b>Employer's name, address, and phone</b>	<b>Position/major Responsibilities</b>	<b>Dates Employed</b> From: _____ / _____ / _____ To: _____ / _____ / _____
	<b>Reason for Leaving</b>	<b>Supervisor's Name</b>
<b>Employer's name, address, and phone</b>	<b>Position/major Responsibilities</b>	<b>Dates Employed</b> From: _____ / _____ / _____ To: _____ / _____ / _____
	<b>Reason for Leaving</b>	<b>Supervisor's Name</b>
<b>Employer's name, address, and phone</b>	<b>Position/major Responsibilities</b>	<b>Dates Employed</b> From: _____ / _____ / _____ To: _____ / _____ / _____
	<b>Reason for Leaving</b>	<b>Supervisor's Name</b>

**REFERENCES**

List three professional references who can evaluate your qualifications for this position. Friends and family do not count. List supervisors, teachers, professors, etc only. If you have previous experience within a child care center or early education field, one reference should be from the director, administrator, or supervisor at the facility.

<b><u>Name</u></b>	<b><u>Relationship</u></b>	<b><u>Phone Number</u></b>

**AVAILABILITY**

Kiddy Kollege Child Care Center must schedule staff according to the number of children in attendance. At times, staff members will be asked to come in early, stay late or leave work early in order to satisfy mandated staff:child ratios.

Are you willing to work under those conditions?  Yes  No

*Please indicate your preferred availability below, the center is open from 6:30AM-6:00PM, Monday-Friday.*

Day	Monday	Tuesday	Wednesday	Thursday	Friday
START					
END					

Please list any upcoming commitments that are already scheduled for within the next year that you will need time off for:

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

**QUESTIONS**

Why are you interested in working at a Child Care Center?

Please explain your qualifications for the job.

Describe some experiences you have working with children.

**ACKNOWLEDGEMENT**

**PERMISSION FOR BACKGROUND CHECK**

Kiddy Kollege Child Care Center values the inherent worth and dignity of every person, fosters tolerance, sensitivity, mutual respect and nurtures diversity. In order to hire employees a background check is completed. Your date of birth needs to be forwarded with your application on this form.

"Applicants are considered and employees are treated during employment without regard to age, race, color, religion, sex, national origin, marital or veteran status, medical condition, or disability. Date of birth is required from all applicants and employees to facilitate a background check."

Applicant's Name: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Position You are Applying For: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I understand that successful completion of a physical examination and background check is a condition of employment. I certify that all information provided on this application is true and complete. I understand that falsification of any information may be considered justification for dismissal if discovered at a later date.

If I am employed, I agree to comply with and be bound by the safety and health rules and regulations, and rules of conduct established by Kiddy Kollege Child Care Center.

I give Kiddy Kollege Child Care Center the right to investigate any and all statements made in this application for the purpose of employment and retention of employment. This investigation may include, but is not limited to, credit reports, criminal conviction records, motor vehicle driving records and previous employment history. Further, I hereby release from liability and hold harmless this employer and its representatives, all persons and organizations/companies for furnishing such information.

If requested, I agree to a drug testing prior and during employment or for post accident occurrences.

The employer is an equal opportunity employer. Kiddy Kollege Child Care Center not discriminate in employment and no questions on this application are used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.



\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**THANK YOU FOR YOUR APPLICATION!**

\_\_\_\_\_ Interview Scheduled Interview Date and Time: \_\_\_\_\_ at \_\_\_\_\_

Hired  Not Hired Start Date: \_\_\_\_\_

Schedule: \_\_\_\_\_  Mon  Tues  Wed  Thurs  Fri