

Sheridan Child Development Center Application

Personal Information

Name (first, middle, last) _____
DOB _____/_____/_____ Social Security Number _____/_____/_____
Address _____
City _____ State _____ Zip Code _____
Cell Number _____ Home Number _____
Position that you are applying for _____
Are you at least 18 years old? Yes No If no, when will your be 18? _____

Education

High School _____
Town _____ Years Attended _____ - _____
Did you graduate? Yes No Still Attending
Expected Date of Graduation [mo/yr]? _____

College or Trade School _____
Town _____ Years Attended _____ - _____
Did you graduate? Yes No Still Attending
Expected Date of Graduation [mo/yr]? _____

Skills that apply to this position- List any experiences, training that you feel would qualify you to work at Sheridan Child Development Center...

Are you currently certified in CPR? Yes No
Are you currently certified in First Aid? Yes No
Are you legal to work in the United States? Yes No

Where did you hear about SCDC or this position opening?

Daily Nebraskan/UNL Lincoln Journal Star NE Workforce Friend
Employee _____
Other _____

References

Name _____ Number _____

Relationship _____

Name _____ Number _____

Relationship _____

Name _____ Number _____

Relationship _____

Past Job Experiences [please list from most recent and so on]

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

Starting Pay _____ Ending Pay _____

Reason for leaving _____

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

Starting Pay _____ Ending Pay _____

Reason for leaving _____

Job _____ Position _____

Length of time worked there _____

Job Description _____

Name of Supervisor _____ Number _____

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Reason for leaving _____