Little Eyes Daycare





First name:	Last name:	Middle nam	e:
		State:	
Personal Phone number:	Per	sonal Email:	
Date of Birth:	Social Security N	umber:	_
Position Details Position Applying for:			
11.	Head Teacher		
	Teachers assistant		
	Food service provider		
f classroom position, w	hich age group do you p	refer:	
	No Preference		
	Infants		
	Early Toddlers		
	Twos/Threes		
Preferred Hours:	Preschool		
	No Preference		
_	Part Time		
	Full Time		
Proformed Data of Day			
Preferred Rate of Pay:			
Availability:	1	1	
Monday: Yes/No	Morning: Yes/No	Early Afternoon: Yes/No	Evening: Yes/No
Tuesday: Yes/No	Morning: Yes/No	Early Afternoon: Yes/No	Evening: Yes/No
Wednesday: Yes/No	Morning: Yes/No	Early Afternoon: Yes/No	Evening: Yes/No
	N W. D.	F1 A G	Evening, Veg/Ne
Thursday: Yes/No	Morning: Yes/No	Early Afternoon: Yes/No	Evening: Yes/No

Little Eyes Daycare





		Degree Obtained:
Area of Study:	Dates Attended:	Did you Graduate? Yes/No Degree Obtained:
School	Dates Attended	Degree obtained
Area of Study:		Did you Graduate? Yes/No Degree Obtained:
School:	Dates Attended:	Degree Obtained:
Area of Study:		Did you Graduate? Yes/No
Job Experience:		
Employer:	Position:	
Date of Employment:	Reason for Lea	ving:
Employer:		
Date of Employment:	Reason for Lea	ving:
Employer:		
Date of Employment:	Reason for Lea	ving:
References:		
Full Name:	Relationsh	ip:
Phone Number:	Email:	
		ip:
Phone Number:	Email:	
Full Name:	Relationsh	ip:
Phone Number:	Email:	
Applicant Statement:		

Little Eyes Daycare

Employment Application

