

**Evergreen Preschool Ministry  
Job Application**

Today's Date: \_\_\_\_\_ Position Applying for: \_\_\_\_\_

**Personal Data**

Name \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Daytime Phone: ( ) \_\_\_\_\_ Evening Phone: ( ) \_\_\_\_\_

Alternate Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

**Education:**

EDUCATION	SCHOOL	DATES ATTENDED	DIPLOMA/DEGREE/CERTIFICATES
High School			
College			
Other			

**Child Care Training**

List all courses, workshops, and conferences related to child development and early childhood education. Attach additional pages if necessary.

Title of course/ Workshop/certificate	Sponsor	Location	Date(s)	Number of Hours

**Employment History**

List in order beginning with your most recent employment. Attach additional pages if necessary.

Employer	Employer's Address	Position/Job	Date(s) worked	Reason for leaving

**References:**

List at least three persons who are not related to you by blood, marriage, or adoption to be contacted as references. At least one must be a former employer – someone who has supervised your work. Addresses must be complete and accurate.

COMPLETE NAME	COMPLETE ADDRESS	PHONE NUMBER

Are you a Christian? \_\_\_\_\_ Do you attend church regularly? \_\_\_\_\_

Where is your church membership? (Name of Church) \_\_\_\_\_

Church Phone Number: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_

**Scheduling Availability:**

At Evergreen Presbyterian Childhood Ministries, classroom stability is important. We must ensure that we have trained employees available when children are in our care. Our center is open from 6:30am until 5:30 pm., Monday through Friday. Your flexibility in times you can work is important to the process of providing quality child care. Please complete the form below to help us schedule you should you come to work for us. Please indicate the hours you **ARE AVAILABLE** to work. \_\_\_\_\_

Are you seeking Part Time Employment \_\_\_\_\_

Are you seeking Full Time Employment \_\_\_\_\_

Are you seeking Substitute Work \_\_\_\_\_

\*A Criminal History Background Information Check and Drug Screen will be completed through Personal Resources.

\*\*Have there ever been any criminal charges against you? If yes, please give details. \_\_\_\_\_

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview may result in termination. I understand that employment at this organization is “**at will**”, includes no guarantee, contract, or promise of employment for any specified length of time. I understand that I am required to abide by the rules and regulations as set forth for employees of Evergreen Presbyterian Childhood Ministries.

\_\_\_\_\_  
(Signature of Applicant)

Date \_\_\_\_\_

References should be completed by persons who are not related to you by blood, marriage, or adoption. **At least one must be a former employer – someone who has supervised your work.** Form must be complete in order to be considered for an interview.

## REFERENCE FORM

Date: \_\_\_\_\_

To: \_\_\_\_\_  
(Reference Contact)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code) (Phone)

\_\_\_\_\_ has applied to work in our child care facility as a \_\_\_\_\_. They have given your name as a person to be contacted for information regarding their character, suitability to work with children and previous or prospective job performance. Please answer the following questions and provide any additional comments that could be helpful. Your response will be kept confidential.

1. How long have you known this person? \_\_\_\_\_
2. What is/was your relationship with this person? (friend, employer, pastor, neighbor, etc.)

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- |   |                    |
|---|--------------------|
| 3. In your opinion, is this person:     | Comments:          |
| Dependable                              | Yes _____ No _____ |
| Honest                                  | Yes _____ No _____ |
| Even-tempered                           | Yes _____ No _____ |
| 4. To your knowledge, does this person: |                    |
| Do drugs?                               | Yes _____ No _____ |
| Drink excessively?                      | Yes _____ No _____ |
| Use abusive/foul language               | Yes _____ No _____ |

5. If you are/were an employer of this person, describe the type of work the person does/did and the quality of the work he/she performed. What was the reason for the person leaving your employment, if applicable?

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6. If a former employer, would you rehire this individual? \_\_\_\_\_ Why or why not?

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7. If you have young children, would you leave your child/children in the care of this person? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.

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8. Do you know of any reason why this person might NOT be suitable to care for children? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

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9. To your knowledge does this person have qualities, traits, or abilities that make him/her particularly suitable to care for children? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.

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10. What do you consider to be this individual's strengths in working with children?

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11. What do you see as this individual's weaknesses in the area of working with children?

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12. What type of experiences have you had with this individual in relation to their teaching and leadership with children?

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13. If you have any additional comments about this person you feel would be useful when we are considering his/her application for employment in our child care facility, please state below.

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Signature

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Date

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Telephone Number

Please return this form to:

Evergreen Presbyterian Childhood Ministries  
Attn: Michelle Quattlebaum, Director  
1105 North Pontiac Ave.  
Dothan, Al 36303  
(334)794-7319

If you prefer **not** to provide a reference for this person, please sign here and return this form to the address above.

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(Signature)

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(Date)