

Job Application

Fill out the application below and return to:

Cortland Child Development Centers
 59 Pomeroy Street
 Cortland NY, 13045

Fax: 607-756-2530
Email: childdevjenny@gmail.com

Personal Information

Name: _____ **Date:** _____
Address: _____
Phone: _____ **Email:** _____

Employment Desired

Position: _____ **Date You Can Start:** _____
Current Employer: _____ **May We Contact Them?** Yes No

Schedule (Days & Hours)

Monday: _____ **Tuesday:** _____ **Wednesday:** _____ **Thursday:** _____ **Friday:** _____

Education

High School: _____ **Graduate?** Yes No **Major:** _____
College: _____ **Graduate?** Yes No **Major:** _____
Special training, skills, etc. _____

Prior experiences with groups of children?

Former Employment

	Dates	Name of Employer	Address	Position	Phone
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

References (Must List 3 – No Relatives)

	Name	Address	Daytime Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Have you ever been convicted of a felony or misdemeanor? Yes No
 (Conviction will not necessarily disqualify you from employment.)

If yes, please explain: _____

Applicant's Statement

I authorize the investigation of all statement contained in this application. I understand that misrepresentation of facts stated above may be cause for dismissal. Further, I understand and agree that my employment is for no definite period and may be terminated at any time without previous notice or cause. I also understand that if hired, I am required to abide by all rules and regulations of this program and the licensing requirement of the NYS Dept. of Social Services.

Print Name _____ **Signature** _____ **Date**

Office Use Only

Start Date: _____ **Hire Date:** _____