



# FIO360 Application for Employment

Today's Date: \_\_\_\_\_

Position Desired: \_\_\_\_\_

**Please type or print in ink.**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_

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

Home Telephone Number \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security Number \_\_\_\_\_

Email Address \_\_\_\_\_

Legal US Resident? \_\_\_\_\_ If no, then submit verification of your legal right to work in US.

Are you 18 years or older? \_\_\_\_\_

Can you perform the essential functions of the job? YES \_\_\_\_\_ NO \_\_\_\_\_

**Education:**                      **Place**                      **Dates**                      **Diploma, Certification,**  
**Degree**

Elementary: \_\_\_\_\_

Secondary: \_\_\_\_\_

College: \_\_\_\_\_

Other: \_\_\_\_\_

### Experience with groups of children:

(Indicate ages of children, your duties, dates of time you worked in this position, reasons for leaving)

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Have you attended/completed any child care training courses? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please list:

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Please list employment history for the past 10 years, beginning with your most current or last employer. If you have been unemployed during any time within the past ten years, list how you spent your time, e.g. student, housewife, unemployed, etc. If you need additional space, please use separate employment record form.

<u>Month/Year</u>	<u>Name and Address of Employer</u>	<u>Position</u>	<u>Last Salary</u>
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From:

To:

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From:

To:

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From:

To:

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From:

To:

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From:

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Do you have a criminal record? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

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Have you ever been shown by credible evidence, e.g., a court order or jury, a department investigation or other reliable evidence to have abused, neglected or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct? YES \_\_\_\_\_ NO \_\_\_\_\_

Under the Americans with Disabilities Act of 1991 (ADA), this program is required to reasonably accommodate individuals with a disability. The reasonable accommodation requirement applies to the application process, any pre-employment testing, interviews and actual employment. If you are disabled and require accommodation, you may request it at any time during the interview process. You are obligated to inform the program director of your needs if it will impact your ability to perform the job for which you are applying.

**Having read the job description for the position for which you are applying, are you in all respects, able to adequately perform the duties as described? YES\_\_\_\_\_ NO\_\_\_\_\_**

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you have a valid driver's license? YES\_\_\_\_\_ NO\_\_\_\_\_**

If yes, give license number and class of license \_\_\_\_\_

**Have you had CPR training within the past two years? YES\_\_\_\_\_ NO\_\_\_\_\_**

If yes, please give expiration date \_\_\_\_\_

**Have you had First Aid training within the past three years? YES\_\_\_\_\_ NO\_\_\_\_\_**

If yes, please give expiration date \_\_\_\_\_

**Bright from the Start: Georgia Department of Early Care and Learning requires annual child care training. Are you willing to participate? YES\_\_\_\_\_ NO\_\_\_\_\_**

**I certify that all information on this application is correct. I have not given any false statement concerning my qualification requirements.**

**Signature \_\_\_\_\_ Date\_\_\_\_\_**