



PO Box 38 – WEWAHITCHKA FL 32465 (850) 639-5080 FAX (850) 639-4173

### EMPLOYMENT APPLICATION

Job Title of Position Applying for: \_\_\_\_\_

#### PERSONAL DATA

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Are you eligible for employment in the U.S.A.?  Yes  No

Date available to begin employment: \_\_\_\_\_

Are you related to a current employee of North Florida Child Development, Inc.?  Yes  No

If yes, provide the name of relative: \_\_\_\_\_

Are you related to a current Board or Policy Council member of NFCD, Inc.?  Yes  No

If yes, provide the name of relative: \_\_\_\_\_

Are you a current parent of a child attending North Florida Child Development, Inc.  Yes  No

Are you interested in  Full Time  Part Time  Either Full or Part Time  On-call

How did you learn of this position's availability?  Newspaper  Internet  Staff  Other

#### SPECIAL SKILLS

Driver's License  Yes  No

Other Licenses/Certifications:

\_\_\_\_\_

Foreign Language:

\_\_\_\_\_

Computer Programs/Versions:

\_\_\_\_\_

\_\_\_\_\_

Have you completed the  
Department of Children & Families Training:

20 Hour "Introduction to Child Care"  Yes  No

10 Hour "Behavioral Observation and Screening"  
 Yes  No

10 Hour "Developmentally Appropriate" module  
 Yes  No

EDUCATIONAL HISTORY

| Name of Last High School Attended and City/State | Dates Attended | High School Diploma?                                     | G.E.D.?                                                  |
|--------------------------------------------------|----------------|----------------------------------------------------------|----------------------------------------------------------|
|                                                  |                | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Technical School<br>Community College<br>University | Dates Attended | Major(s) | Credit Hours Earned | Type of Degree Earned |
|-----------------------------------------------------|----------------|----------|---------------------|-----------------------|
|                                                     |                |          |                     |                       |
|                                                     |                |          |                     |                       |
|                                                     |                |          |                     |                       |

PERSONAL REFERENCES

Please list at least three references whom have first-hand knowledge of your ability, character, and personality.

|                                                                                                          |
|----------------------------------------------------------------------------------------------------------|
| Name: _____ Relationship: _____<br><br>Address: _____ City: _____ State _____<br><br>Phone: (____) _____ |
|                                                                                                          |
| Name: _____ Relationship: _____<br><br>Address: _____ City: _____ State _____<br><br>Phone: (____) _____ |
|                                                                                                          |
| Name: _____ Relationship: _____<br><br>Address: _____ City: _____ State _____<br><br>Phone: (____) _____ |
|                                                                                                          |

EMPLOYMENT HISTORY

List below all present and past employment, in chronological order, of any jobs you have held during the previous 2 years or last three jobs.

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Dates of Employment: To: \_\_\_\_\_ From: \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe Job Duties: \_\_\_\_\_

\_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Dates of Employment: To: \_\_\_\_\_ From: \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe Job Duties: \_\_\_\_\_

\_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ City : \_\_\_\_\_ State \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Dates of Employment: To: \_\_\_\_\_ From: \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe Job Duties: \_\_\_\_\_

\_\_\_\_\_

VOLUNTEER EXPERIENCE and COMMUNITY ACTIVITIES

|                                        |                                      |
|----------------------------------------|--------------------------------------|
| Name and Address of Organization:      | Contact's Name and Telephone #:      |
| Describe the activities you conducted: |                                      |
| Total Time: ____ Years ____ Months     | Dates of Time: To: _____ From: _____ |
|                                        |                                      |
| Name and Address of Organization:      | Contact's Name and Telephone #:      |
| Describe the activities you conducted: |                                      |
| Total Time: ____ Years ____ Months     | Dates of Time: To: _____ From: _____ |
|                                        |                                      |

ADDITIONAL INFORMATION

Please provide any additional information you wish to include in your application.

---



---



---

- I understand that documentation of employment eligibility for compliance with the U.S. Immigration Control and Reform Act is required at the time of hire.
- I understand that I am required to provide a tuberculin (TB) test results at the time of employment and bi-annually thereafter.
- I understand that I am required to provide results of a physical at time of employment and every year thereafter.
- I hereby give my consent to North Florida Child Development, Inc. to contact previous employers, unless otherwise noted on the application, for purposes of verification of employment and/or employment references.
- I understand that I am required to provide a local law enforcement background check at time of employment and every year thereafter.
- I understand that my being hired is contingent upon final approval by the Policy Council.
- I hereby certify that the facts set forth in the foregoing employment application are true and complete to the best of my knowledge.
- I understand, if I am employed, that falsified, incomplete, or misleading statements on this application will result in my dismissal.
- I understand that North Florida Child Development, Inc. is a drug free workplace.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date