



366 E Brundage Street, PO Box 6351
Sheridan, WY 82801
307-673-0403 Phone
307-673-0753 Fax

Employment Application

First Light Children's Center is an equal opportunity employer and in conformity with applicable laws does not discriminate on the basis of race, color, religion, age, sex, national origin, physical or mental disability, and any other impermissible criteria according to applicable law. No question on this application is intended to secure such information to be used for such discrimination. This application will be given every consideration but its receipt does not imply the applicant will be employed.

* Please print and make sure that you complete this application entirely to avoid a delay in processing.

General Information

Name: Last First Middle

Address: Number Street City State Zip Code

If you have ever been known by any other name please list: Maiden: Other:

* It is very important that we are able to contact you if necessary.

Home Telephone Number: Cell Phone Number:
Alternate Telephone Number: E-mail address:

Do you have any relatives or other members of the same household employed by First Light? Yes No

* If yes, their name(s): Dates of employment:
Have you filed an application here before? Yes No If yes, give date:
Have you ever worked here before? Yes No If yes, give date:
Have you ever been involuntarily terminated from employment? Yes No Unsure
*If yes, please explain:

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes No

Have you ever been convicted of a misdemeanor or felony, or are you presently charged with committing a criminal offense? (Responding "yes" will not necessarily disqualify applicant from employment. Do not include any traffic violation, juvenile offenses, criminal charges that have been expunged, or military convictions, except by general court martial.) *Yes No

*If yes, please furnish details of conviction(s), offense(s), location(s), date(s), and sentence(s):
Conviction(s):
Offense(s):
Location(s):
Date(s):
Sentence(s):

Employment Information

Date of application: Referred by:
Position(s) applied for: Teacher Aide Other (Specify:)
Date you would be available for work:
Schedule you prefer to work: Full-time: Part-time:
Are you available for morning and late afternoon work? Yes No
Minimum salary acceptable: \$ Hourly: Weekly: Annually:



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Employment Experience

Start with your present or most recent job. Include military service, assignments and volunteer activities. You may exclude organization names that indicate race, color, religion, sex, or national origin. You may attach a resume, also.

1. Employer: _____ Telephone: _____ Address: _____ City: _____ State: _____ Job Title: _____ Supervisor: _____ Reason for leaving: _____	<u>Date Employed:</u> Mo Yr Mo Yr ____/____ to ____/____ <u>Hourly Rate/Salary:</u> Starting: Final: ____ hr/yr ____ hr/yr	<u>Work Performed</u> _____ _____ _____ _____
2. Employer: _____ Telephone: _____ Address: _____ City: _____ State: _____ Job Title: _____ Supervisor: _____ Reason for leaving: _____	<u>Date Employed:</u> Mo Yr Mo Yr ____/____ to ____/____ <u>Hourly Rate/Salary:</u> Starting: Final: ____ hr/yr ____ hr/yr	<u>Work Performed</u> _____ _____ _____ _____
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You may contact the employers listed above unless I indicate those I do not want you to contact. _____ Signature Date	Do not contact: Employer number(s): _____ Reason(s): _____
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Do you have a valid driver's license? Yes ____ No ____ License number: _____ Exp. Date: _____ State Issued: _____
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Disclosure Statement
Child Abuse and/or Criminal Records

I acknowledge and give my permission for First Light Children's Center to conduct a records check from the Wyoming Department of Human Services, Department of Public Safety/Division of Criminal Investigation (DCI), NCIC computer system, the Sheridan Police Department and/or the Department of Motor Vehicles, the Federal Bureau of Investigation, or any other agency to determine if I have been convicted of a crime involving the mistreatment, molestation, abuse, neglect, or exploitation of a child, or ANY criminal conviction.

I also give my permission for First Light to check with the Wyoming Central Child Abuse Registry for any complaints, investigations, or information they may have on file. I further understand that this information will be used for the sole purpose of determining eligibility for my employment/internship with First Light. Any false statement on this form, or any reports of substantiated complaints or convictions for mistreatment or exploitations of a child, is grounds for denial of my employment/internship with First Light.

Printed full legal name: _____ Signature: _____
 Date of birth: _____ SS#: _____ - _____ - _____ Today's Date: _____

AN EQUAL OPPORTUNITY EMPLOYER



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Education

*If you received your GED please circle "GED" in the High School section. If you attended more than one college/university as an undergraduate, please list the last two.

<p>*High School Name:</p> <hr/> <p>*Years Completed (Circle): 9 10 11 12 GED</p> <p>*High school involvement with any extracurricular activities (i.e. Athletics, Clubs, Intramurals, Community, etc.)</p> <hr/> <hr/> <hr/>	<p>* College/University Name: (Last attended)</p> <hr/> <p>*Years completed (circle): 1 2 3 4</p> <p>*Year Earned Degree: _____</p> <p>*Credits Earned: _____</p> <p>*Degree Awarded: _____</p> <p>*Major Course of Study: _____</p> <p>*College/University involvement with any extracurricular activities (i.e. Athletics, Clubs, Intramurals, Community, etc.)</p> <hr/>
<p>* College/University Name: (Previously attended)</p> <hr/> <p>*Years completed (circle): 1 2 3 4</p> <p>*Year Earned Degree: _____</p> <p>*Credits Earned: _____</p> <p>*Degree Awarded: _____</p> <p>*Major Course of Study: _____</p> <p>*College/University involvement with any extracurricular activities (i.e. Athletics, Clubs, Intramurals, Community, etc.)</p> <hr/>	<p>* Graduate College/University Name:</p> <hr/> <p>*Years completed (circle): 1 2 3 4</p> <p>*Year Earned Degree: _____</p> <p>*Credits Earned: _____</p> <p>*Degree Awarded: _____</p> <p>*Major Course of Study: _____</p> <p>*College/University involvement with any extracurricular activities (i.e. Athletics, Clubs, Intramurals, Community, etc.)</p> <hr/>

Military Service

Have you ever been a member of the United States Armed Services? Yes _____ No _____

If yes, please list skills you acquired that relate to the job for which you are applying:

Additional information or statements that you feel may be helpful to us in considering your application:

Please read and sign: Under the federal employee polygraph protection act of 1988, an employer may not require any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment or continued employment. Any employer who violates this act may have court actions brought against them by the secretary of labor to restrain any such violation and assess civil money penalties up to \$10,000.

First Light Children's Center Authorization

- *I hereby affirm that the facts contained in this application are true, correct and complete to the best of my knowledge. I have not withheld any fact or circumstance that would, if discovered, affect my application unfavorably. I understand that the misrepresentation or omission of a fact called for in this application or other company records may be cause for immediate dismissal.
- *I further authorize this Company to verify any and all information herein contained. This includes the investigation of references and employers listed within to provide you with any and all information concerning my previous employment and other pertinent information.
- *I hereby authorize and permit First Light to hereafter investigate and disclose information contained in this application and such additional information regarding my employment with First Light to any person, firm, or organization (e.g. State Police re criminal check). I also release the Company from all liability for any damage that may result from the utilization of such information.
- *I also understand and agree that no representative of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing unless it is written and signed by an authorized company representative. I also understand if I should become employed by the Company that my employment is at-will and can be terminated by the Company or me at any time without cause and without notice.
- *I further certify that I have read and that I am in full agreement with First Light's Mission Statement and Core Values.
- *I hereby acknowledge that I have read all of the above statements and understand the same:

Signature: _____ **Date:** _____



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APPLICANT AREA:

- Please fill in the areas at the top of this page and return these sheets with your application.
- First Light Children’s Center will be responsible for contacting your references.
- Please provide us with three personal references. (Only one relative is accepted as a reference.)

NAME OF REFERENCE: _____

ADDRESS: _____

TELEPHONE: _____

RE: _____

(Name of Applicant)

The above named individual has applied for a position with First Light. First Light is a childcare and early learning center for infants through six years old located in Sheridan, Wyoming.

This applicant has listed you as a personal reference. Please answer the following questions in the letter and comment on what you feel would assist us in choosing this candidate as an employee.

How long have you known the applicant? _____

What is your relationship to the applicant? _____

Are you aware of any reason(s) why we should not hire this applicant? (If yes, please explain)

Would you recommend this person for employment with children? _____

Why or why not? _____

Why would this person be an asset to First Light? _____

Additional Comments (Please attach)

Signature of Reference

Date:

Thank you for taking the time to answer these questions.



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