

Hope Lutheran Church Nursery School

4131 Lehigh Drive, Cherryville, PA 18035

Employment Application

PERSONAL INFORMATION

Full Name _____

Street Address _____ City _____ State _____ Zip _____

Phone # _____ Email _____

Position applying for: _____

How did you hear of this position? _____

Do you currently have:

Act 34 Pennsylvania Criminal Record Check (less than 12 months old): ___ yes ___ no

Act 151 Pennsylvania Child Abuse History Clearance (less than 12 months old): ___ yes ___ no

Act 114 Federal Criminal History Background Check (less than 12 months old): ___ yes ___ no

First Aid/CPR Certification (less than 2 years old): ___ yes ___ no

Are you a United States Citizen? ___ yes ___ no

Have you ever been convicted of a felony, pleaded no contest in a felony, or been convicted of a misdemeanor resulting in imprisonment or a fine? ___ yes ___ no

EDUCATION

Type of School	Name & Location	Date of Graduation	Diploma/Degree
High School			
College			
Other			

Continuing Education Courses: _____

SKILLS

Technology Experience: _____

Other Skills/Talents (List any additional information you would like us to consider such as volunteer experience, awards, etc.):

EMPLOYMENT

Most Recent Employer	Phone #	Employed Dates From _____ To _____
Address		Name of Supervisor
Job Title/Description of Your Job		
Reason for Leaving		

Previous Employer	Phone #	Employed Dates From _____ To _____
Address		Name of Supervisor
Job Title/Description of Your Job		
Reason for Leaving		

REFERENCES List three references that have known you for at least three years other than relatives.

Name	Relationship	Title	Phone #

I hereby affirm that the information provided on this application (and my accompanying resume, if any) is true and complete. I understand that any false or misleading representation or omissions may disqualify me from further consideration for employment and may result in discharge if discovered at a later date.

I understand and agree that all information furnished within this application may be verified by Hope Lutheran Nursery School. I hereby authorize Hope Lutheran Nursery School to communicate with my former employees, school officials, and references named within this application and release Hope Lutheran Nursery School from any liability as a result of such contact.

In consideration of my employment, I agree to conform to the rules and regulations of this organization. I understand that my employment can be terminated at any time and for any reason at the option of either the organization or myself. I further understand that Hope Lutheran Nursery School is a non-profit, non-discriminatory organization that does not participate in the unemployment compensation program.

Signed _____

Date: _____

Return completed applications to Hope Lutheran Church C/O Trish Claypoole –Hope Lutheran Nursery School Board President. They can either be dropped off at the church or mailed to 4131 Lehigh Drive, P.O. Box 1030, Cherryville, PA 18035.