

## Kid's Kountry Learning Center, Ltd.

## **Employment Application**

| Applicant Information                               |                             |                     |            |         |                 |                        |  |
|---|-----------------------------|---------------------|------------|---------|-----------------|------------------------|--|
| Full Name:  |                             |                     |            | Date:   |                 |                        |  |
| r un marne.   | Last                        | First               |            |         | М.І.            |                        |  |
|   |                             |                     |            |         |                 |                        |  |
| Address:  | Street Address              |                     |            |         |                 | Apartment/Unit #       |  |
|   | Sireer Address              |                     |            |         |                 | Apartment Onit #       |  |
|   |                             |                     |            |         |                 |                        |  |
|   | City                        |                     |            |         | State           | ZIP Code               |  |
| Phone:  |                             |                     | Email      |         |                 |                        |  |
| Date Availat  | ble: So                     | acial Socurity No : |            |         |                 | d Salary: <b>\$</b>    |  |
| Dale Availat  | Jie 50                      |                     |            |         | Desile          | u Salaiy. <del>y</del> |  |
| Position App  | blied for:                  |                     |            |         |                 |                        |  |
|   |                             | YES NO              |            |         |                 | YES NO                 |  |
| Are you a cit                                       | tizen of the United States? |                     | lf no, a   | re you  | authorized to w | vork in the U.S.?      |  |
|   |                             | YES NO              |            |         |                 |                        |  |
| Have you ev   | ver worked for this company | y? 🗆 🗆              | lf yes, v  | when?   |                 |                        |  |
| YES NO<br>Have you ever been convicted of a felony? |                             |                     |            |         |                 |                        |  |
| If yes, explain:                                    |                             |                     |            |         |                 |                        |  |
| n yoo, oxpia  |                             |                     |            |         |                 |                        |  |
| Education   |                             |                     |            |         |                 |                        |  |
| High School: Address:                               |                             |                     |            |         |                 |                        |  |
|   |                             |                     | YES        | NO      |                 |                        |  |
| From:   | То:                         | Did you graduate?   |            |         | Diploma::       |                        |  |
| College:  |                             | Address             | -          |         |                 |                        |  |
| oolicge.  |                             | Address             |            |         |                 |                        |  |
| From:   | To:                         | Did you graduate?   | YES<br>?   | NO<br>□ | Degree:         |                        |  |
|   |                             | , ou g              |            |         | _ og. oo        |                        |  |
| Other:  |                             | Address             | : <u> </u> |         |                 |                        |  |
|   |                             |                     | YES        | NO      |                 |                        |  |
| From:   | То:                         | Did you graduate?   | ?          |         | Degree:         |                        |  |
| References  |                             |                     |            |         |                 |                        |  |
| Please list three professional references.          |                             |                     |            |         |                 |                        |  |
| Full Name   |                             |                     |            |         | Relation        | nship:                 |  |
| Full Name:  |                             |                     |            |         | Relation        | nship:                 |  |

| Company:                             |                              | Phone:   |
|--------------------------------------|------------------------------|----------|
| Address:                             |                              |          |
| Full Name:                           | Relati                       | onship:  |
| Company                              |                              | Phone:   |
| Address:                             |                              |          |
| Full Name:                           | Relati                       | onship:  |
| Company:                             |                              | Phone:   |
| Address:                             |                              |          |
|                                      | Previous Employment          |          |
| Company:                             |                              | Phone:   |
| Address:                             | Sup                          | ervisor: |
| Job Title:                           |                              |          |
| Responsibilities:                    |                              |          |
| From: To:                            | Reason for Leaving:          |          |
| May we contact your previous supervi | isor for a reference? Yes No |          |
|                                      |                              |          |
| Company                              |                              | Phone    |
|                                      |                              | Phone:   |
|                                      | C.,p                         |          |
| Job Title:                           |                              |          |
| Responsibilities:                    |                              |          |
| From: To:                            | Reason for Leaving:          |          |
| May we contact your previous supervi | isor for a reference? Yes No |          |
|                                      |                              |          |
| Company:                             |                              | Phone:   |
|                                      |                              | ervisor: |
| Job Title:                           |                              |          |
| Responsibilities:                    |                              |          |
| From: To:                            | Reason for Leaving:          |          |
| May we contact your previous supervi | isor for a reference? Yes No |          |

| Military Service   |                    |                    |  |  |  |  |  |  |
|--|--------------------|--------------------|--|--|--|--|--|--|
| Branch:  | From:              | To:                |  |  |  |  |  |  |
| Rank at Discharge:   | Type of Discharge: | Type of Discharge: |  |  |  |  |  |  |
| If other than honorable, explain:  |                    |                    |  |  |  |  |  |  |
| Disclaimer and Signature   |                    |                    |  |  |  |  |  |  |
| I certify that my answers are true and complete to the best of my knowledge.   |                    |                    |  |  |  |  |  |  |
| If this application leads to employment, I understand that false or misleading information in my application or<br>interview may result in my release. |                    |                    |  |  |  |  |  |  |
| Signature:   | Date               | 9:                 |  |  |  |  |  |  |

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