



Child Time INC.
Reggio Inspired Learning Centers

APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT: Complete the entire application. You may attach a resume, but you must still complete all questions. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Child Time, Inc. is an Equal Opportunity Employer; all offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

DESIRED LOCATION:				
<input type="checkbox"/> THE AVENUES PRESCHOOL: 410 THIRD AVE. SLC 84103				
<input type="checkbox"/> THE SECOND AVENUES PRESCHOOL: 91 "R" ST. SLC 84103				
<input type="checkbox"/> THE EASTSIDE PRESCHOOL: 1650 E. 3300 S. SLC 84106				
<input type="checkbox"/> THE COTTONWOOD PRESCHOOL 2890 COTTONWOOD PARKWAY SLC 84121				
<input type="checkbox"/> ANY				
SHIRT SIZE: FOR SCHOOL SHIRTS <input type="checkbox"/> S(4-6) <input type="checkbox"/> M(8-10) <input type="checkbox"/> L(12-14) <input type="checkbox"/> XL(16-18) <input type="checkbox"/> XXL(20-22) <input type="checkbox"/> 3X(24-26) OTHER: _____				
APPLICANT INFORMATION				
Last Name		First		M.I. DOB
Address			Apartment/Unit #	
City		State		ZIP
Phone		Cellular Phone		
Date Available		SSN		Email Address
Position/ Age Group desired:				
Pay Scale: per hour		Desired Schedule: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Either)		
Are you a citizen of the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO			If no, are you authorized to work in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever failed to clear a Background Screening in order to work in Child care? <input type="checkbox"/> YES <input type="checkbox"/> NO			If so, when?	
Have you ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO			If yes, explain:	
If hired, are you able to commit to the position and schedule for a minimum of one calendar year? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please list dates of availability:				
EDUCATION				
Have you completed High School? <input type="checkbox"/> YES <input type="checkbox"/> NO			Do you have a Food Handlers Permit? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you taken CPR Training? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list the expiration date:				
Are you certified in Pediatric First Aid? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list the expiration date:				
College or University:		State:		Course of Study:
Did you graduate?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree:		If no degree was obtained please list the number of ECE credits earned:
College or University:		State:		Course of Study:
Did you graduate?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Degree:		If no degree was obtained please list the number of ECE credits earned:

Other Credentials or Certifications:					
Please List Workshops and Trainings that you have attended for which you have certificates:					
Class Name:	Training Organization:	Credit Hours:	Class Name:	Training Organization:	Credit Hours:
REFERENCES					
<i>Please list three professional references.</i>					
Full Name			Position		
Company			Phone		
Length of relationship:			Other Number		
Full Name			Position		
Company			Phone		
Length of relationship:			Other Number		
Full Name			Position		
Company			Phone		
Length of relationship:			Other Number		
EMPLOYMENT HISTORY					
Related Work Experience, please begin with the most recent.					
Company		Supervisor:		Phone:	
Hours worked: _____ - _____		Starting Wage \$ _____ per hour		Ending Wage: \$ _____ per hour	
Position:		Age group worked with:		Group ratio: :	
Responsibilities					
Reason for Leaving:					
Company		Supervisor:		Phone:	
Hours worked: _____ - _____		Starting Wage \$ _____ per hour		Ending Wage: \$ _____ per hour	
Position:		Age group worked with:		Group ratio: :	
Responsibilities					
Reason for Leaving:					
Company		Supervisor:		Phone:	
Hours worked: _____ - _____		Starting Wage \$ _____ per hour		Ending Wage: \$ _____ per hour	
Position:		Age group worked with:		Group ratio: :	
Responsibilities					
Reason for Leaving:					

PROFESSIONALISM	
Will you be diligent in acquiring state required training in child development through attending seminars, conferences or training programs available in the community outside of the workplace? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Are you willing to volunteer in the classroom for 1 hour in order to audition for the available position? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Are you licensed to drive a motor vehicle in the state of Utah? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Do you have reliable transportation to and from the center? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Can you anticipate arriving promptly (as early as 7:30 AM) despite severe weather conditions? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Can you lift and carry up to 50 lbs? <input type="checkbox"/> YES <input type="checkbox"/> NO	Would you be interested in Substitute work? <input type="checkbox"/> YES <input type="checkbox"/> NO
How many unscheduled days off did you take during the last year – this does not include scheduled vacation time?	
Do you smoke? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, can you refrain from doing so the entire duration of your shift? (This includes breaks and lunch hour, due to caring for children with allergies and asthma.) <input type="checkbox"/> YES <input type="checkbox"/> NO	
What age group do you prefer to work with?	
Is there an age group that you would not like to work with?	
ESSAY QUESTION	
1. Describe your ideal job?	
2. What are your best teaching qualities?	
3. What is your personal philosophy about Early Childhood Education?	
4. What is your personal philosophy about behavior and discipline? What techniques do you use?	
5. Please describe any experience that you have had with Emergent Curriculum or the Reggio Emilia Philosophy:	
6. In your opinion, what are the characteristics of a high quality early childhood program?	
7. Why do you feel that you would be an asset to our program?	
8. What do you find most challenging about working with children?	

9. What would your former employer say about your job performance?	
10. What changes would you like to see made in the childcare industry?	
DISCLAIMER AND SIGNATURE	
<p>Child Time, Inc. is required by law to conduct a complete and thorough background check of any staff member it employs in order to assure the safety of the children in our care. This is administered by the State of Utah and the Federal Government.</p> <p>I understand that investigation into my character and reputation will be conducted prior to employment. I hereby authorize all past employers, organizations and references to supply relevant information about myself and my past work performance to be used in determining my possible employment. By signing below, I release the previously mentioned entities from all liability in responding to inquiries concerning my application for employment.</p> <p>I understand that I will be required to provide documentation for all certificates, transcripts, diplomas or degrees listed on my application.</p> <p>If employment is offered, I understand that I will be required to obtain an annual TB test, Food Handlers Permit, CPR and First Aid certifications in order to continue employment.</p> <p>I understand that the first 3 months of employment are probationary and that if my services have not proved satisfactory, my employment may be terminated at any time.</p> <p>By signing below, I am stating that I understand all of the questions and statements made in this application. If offered a position I agree to follow the policies and procedures outlined in the Child Time Inc. Staff Manual, Parent Handbook and other corporate documents.</p>	
Signature	Date
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>	
Signature	Date
FOR OFFICE USE ONLY	
Date of Interview	Date of audition
Interviewed by	Observed by
Results	
If applicable, Date of Hire	Date of Orientation
Date BCI was mailed	First day of unsupervised employment