



Application for Employment Childcare Work

Please note that all staff will be required to:

- Submit a medical check-up form, valid for one year from exam date.
- Pass a background check.
- Get fingerprinted.
- Verify academic credentials.
- Complete HR & Department of Health paperwork.
- Provide 2-3 reference letters.
- Take mandatory online courses relating to childcare.

PERSONAL INFORMATION

Name: _____
 Street Address: _____
 Cite, State, Zip: _____
 Telephone: _____
 Email: _____

Are you citizen of the U.S. or do you have a legal right to work in the U.S.? Yes No
 Have you been convicted of or pleaded no contest to a felony in the last five years? Yes No
 If yes, please explain: _____

EMPLOYMENT AREA OF INTEREST (check all that apply)

- One-To-One Toddler Class Teacher
- 3K or Pre-K Head Teacher
- 3K or Pre-K Assistant Teacher
- Afterschool Group Leader
- Summer Program Group Leader

- Summer Program Teacher
- Summer Program Assistant Teacher
- Summer Program Specialist (Arts
Sports Music Performing Arts
Nature/Science)
- Volunteer, in which area:

Days/Hours Available: _____
 Date you are available to start work? _____
 Salary desired? Annual or Hourly? _____

EDUCATIONAL HISTORY

Name of school	Degree/Diploma	Graduation Date
HS:		
College:		
Other:		

Are you currently a student? Yes No If yes, where? _____

Awards – Licenses – Credentials – Certifications	Location	Year

Certificate	Expiration	Certificate	Expiration	Certificate	Expiration
DOE fingerprint		CPR		Standard first aid	
OCFS fingerprint		Food Handler		Advanced first aid	

EMPLOYMENT/VOLUNTEER HISTORY

Employer/Volunteer Organization: _____
 Dates Employed: _____
 Address: _____
 Supervisor: _____
 Telephone Number: _____ Position Title: _____
 Reason for Leaving: _____

Employer/Volunteer Organization: _____
 Dates Employed: _____
 Address: _____
 Supervisor: _____
 Telephone Number: _____ Position Title: _____
 Reason for Leaving: _____

Employer/Volunteer Organization: _____
 Dates Employed: _____
 Address: _____
 Supervisor: _____
 Telephone Number: _____ Position Title: _____
 Reason for Leaving: _____

May We Contact Your Present Employer? Yes No

May We Contact Your Last Employer? Yes No

Please name any relatives who are presently (or have formerly been) employed by A.C.T. Programs or The Cathedral of St. John the Divine? _____

REFERENCES not included above:

Name/Title/Company/Telephone Number: _____

WORKING WITH CHILDREN

What age group would you prefer to work with?

- Pre-School (ages 2-4)
- Kindergarten-Second Grade (ages 5-7)
- Third-Fifth Grade (ages 8-11)
- Young Teens (ages 12-15)

Have you ever been fingerprinted by previous employers? Yes No

If yes, when and by which organization? _____

How did you learn about our employment opportunity?

Why are you applying to work at ACT?

How can you help ACT stay true to its mission?

Have you ever worked with children before? If so, what ages and in what capacity? If not, explain why you are interested in working with children:

What strengths and skills do you bring to this position?

How do you handle disruptive and rude behavior in a group?

You are tasked with planning a 45-minute indoor activity for a group of 10 children in your preferred age group. Please describe, in detail, how you will plan the activity with a beginning, middle and end, and how you will keep the children engaged throughout.

Beyond compensation, what can this organization provide you?

I certify that the information contained in this application is true and complete. I understand that any false information may be grounds for not hiring me or for immediate termination of employment at any point in the future. I authorize the verification of any information listed above.

Print Name _____

Date _____

Signature _____