|  |
| --- |
| **A picture containing sitting, food, people, drawing  Description automatically generatedEmployment Application** (Fully complete both sides) |
| Position Applied For:       |
| Social Security Number      | Last Name       | First Name      | Middle Name      |
| Address       | City       | County      |
| State       | Zip Code      | Hone Phone      | Cell Phone      |
| Date of Birth      | NC Driver’s License Number      | Have you ever worked for CCDC? If so, when.      |

**Education**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Level** | **Name of School** | **Dates Attended** | **Course of Study** | **GED/Degree/Diploma Received** |
| High School |       |      to      |       |       |
| College or University |       |      to      |       |       |
|       |      to      |       |       |
|       |      to      |       |       |
| Graduate or Professional School |       |      to      |       |       |
|       |      to      |       |       |
| Educational/Vocational Schools |       |      to      |       |       |

**Early Childhood Coursework**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course** | **Name of Course** | **Date Completed** | **Level/Subject Area** |
| EDU 119 | EC Credentials |       |  |
| EDU 251 and EDU 252 | Administrative Credentials |       | [ ] I [ ]  II [ ] III |
| AAS in ECE/CD | Associates Degree |       |  |
| BA or BS | Bachelor’s Degree |       |  |
| MA | Master’s Degree |       |  |

Additional ECE semester hours received       hours

**Work History**

 (List childcare and early childhood experience first)

|  |  |
| --- | --- |
| Current or last employer      | Address      |
| Job Title      | Supervisor’s Name      | Number of people supervised by you      |
| Date employed (mo/yr)      | Starting salary      | Ending salary      | Reason for Leaving      |
| May we contact employer      | How long were you at this job? (yrs.mo)      | [ ] Full time [ ] Part time |
| Describe Job Duties:      |

|  |  |
| --- | --- |
| Current or last employer      | Address      |
| Job Title      | Supervisor’s Name      | Number of people supervised by you      |
| Date employed (mo/yr)      | Starting salary      | Ending salary      | Reason for Leaving      |
| May we contact employer      | How long were you at this job? (yrs.mo)      | [ ] Full time [ ] Part time |
| Describe Job Duties:      |

**References**

List the names of at least two people we may contact as references.

|  |  |  |
| --- | --- | --- |
| Reference Name | Reference Address | Reference Phone Number |
| 1.       |       |       |
| 2.       |       |       |

Have you ever been convicted of breaking a law other than a minor traffic violation?

 [ ]  Yes (If yes, give the date and explain fully on an addition piece of paper if more space is needed)

[ ]  No

Have you ever had a Department of Social Services (DSS) Substantiation?

[ ]  Yes (If yes, list county/state and give the date and explain fully on an additional piece of paper if more space is needed)

[ ]  No

I certify that I have given true, accurate, and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration, and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigations of all statements made in this application and understand that false information of documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or dismissal if I am employed, and (or) criminal action. I further understand that dismissal on unemployment shall be mandatory if fraudulent disclosures are given to meet position qualifications.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_