Field of Dreams Preschool and Child Care

Application for Employment

Full Name (print):			Date:		
resent Address:					
Previous Address: (i	if under 4 years)				
Birthdate:		SS#			
Home phone:		Cell phone:	Email :	Email :	
Do you have a vali	d driver's license? Y	Position applying () Full Time () F	for: Mode		
Monday	Tuesday	Wednesday	Thursday	Friday	
lave you ever been		Y() N() When?)		

Educational Background

High School:		year graduated
College:		Year graduated
Major:		Degree earned
		Job Related Experiences
Company Name:		
Address:		
Date of employment:	From	To
Amount of pay:	per hr	
Job description:		
Company Name:		
Address:		
Date of employment:	From	To
Amount of pay:	per hr	
Job description:		
Reason for leaving:		
Company Name:		
Address:		
Date of employment:	From	_To
Amount of pay: Job description:		
Passan for lawing		

Professional References

(No jobs within the past two years)

Name:	Telephone:	
Name:	Telephone:	
Occupation:		
Name:	Telephone	
Occupation:		
Address:		

May we contact your former employers and references listed on this application	ation?
If not, why?	
The facts set forth above in my application for employment are true and complete. employed, any misinformation of facts in this application shall be sufficient cause for	
I understand if I am hired there is a 90 day probationary period in which I will be per time my job requirements are not satisfactory my employment may be terminated	riodically reviewed. If at any
All fees associated with the hiring process (Fingerprinting, TB test, first aid, bloodboding screening) are paid by New Harvest DBA Field of Dreams, but will be taken ou reimbursed to my employer if I, for any reason, am no longer employed before my period has ended. If the pay check does not cover the balance due to New Harvest, Preschool and Childcare and there haven't been any arrangements agreed upon the will be taken to collections which will then include, but not be limited to court costs interest, collection fees, and any other charges associated with collecting the monic	t of my pay and 90 day probationary / Field of Dreams en the balance owed s, attorney's fees,
I understand the terms and conditions and agree to them fully.	
Signature of Applicant:	Date: