



Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age national origin, disability or veteran status.

## APPLICATION FOR EMPLOYMENT

P E R S O N A L	Last Name	First	Middle	Date
	Street Address			Home Telephone
	City, State, Zip			Business Telephone
	Have you previously been employed by TDC Learning Centers, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes: Month and Year _____ Location _____			Social Security #
	Position Desired			Desired Pay
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No   If not, what hours can you work? _____			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Other special training or skills (languages, child development classes, volunteer experiences, etc.) _____ _____ _____			When will you be available to begin work? _____

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of Years Completed	Did You Graduate?	Degree or Diploma	
	Graduate					<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College					<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business/Trade/Technical					<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School					<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Elementary					<input type="checkbox"/> Yes <input type="checkbox"/> No	

S I G N A T U R E	<p>The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.</p> <p>I understand that acceptance of an offer of employment does not create a contractual obligation on the employer to continue to employ me in the future.</p>	
	_____	_____
	Date	Signature

# EMPLOYMENT

*(Attach a resume or other sheets if needed)*

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

<b>1</b>	Company Name	Telephone
	Address	Employed (State month and year) From _____ To _____
	Name of Supervisor	Weekly pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

<b>2</b>	Company Name	Telephone
	Address	Employed (State month and year) From _____ To _____
	Name of Supervisor	Weekly pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

<b>3</b>	Company Name	Telephone
	Address	Employed (State month and year) From _____ To _____
	Name of Supervisor	Weekly pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

<b>4</b>	Company Name	Telephone
	Address	Employed (State month and year) From _____ To _____
	Name of Supervisor	Weekly pay Start _____ Last _____
	State Job Title and Describe Your Work	Reason for Leaving

**Write a paragraph explaining "Why I Want this Job":**

We may contact the employers listed above unless you indicate those you do not want us to contact.	<b>DO NOT CONTACT</b>
	Employer(s) _____
	Reason _____ _____