



20272 Veterans Drive
Elkhorn, NE 68022
402-289-1727

Application for Employment

The Elkhorn Public Schools Foundation does not discriminate on the basis of sex, race, national origin, marital status, age or disability in admission or access to, or treatment of, or employment in, its programs and activities. It is the intent of the Elkhorn Public Schools Foundation to comply with both the letter and the spirit of the law in making certain discrimination does not exist in its policies, regulations and operations.

Name _____ Date _____

Address _____ Phone _____

City _____ State _____ Zip _____

Social Security # _____ DOB _____

Email _____

Drivers License # _____ State _____ Expiration _____

Position Desired: _____ Site Director _____ Assist. Director _____ Child Care Assist.

Pay Expected _____ Do you have your own transportation? Yes No

Hour's Available _____ M _____ T _____ W _____ Th _____ F

Have you applied here before? Yes No When? _____

I am available to start on _____

Are you authorized to work in the United States? Yes No

If your answer is no, please explain. _____

Have you ever been convicted of a felony or misdemeanor? Yes No

If your answer is yes, please give details. _____

Describe relevant child care experience. _____

Employment Experience

Employer _____

Address _____ Phone # _____

City _____ State _____ Zip _____

Job Title _____ Salary or Hourly rate _____

Supervisors' Name _____

Reason for leaving _____

Dates of Employment: From _____ To _____

Employer _____

Address _____ Phone # _____

City _____ State _____ Zip _____

Job Title _____ Salary or Hourly rate _____

Supervisors' Name _____

Reason for leaving _____

Dates of Employment: From _____ To _____

Employer _____

Address _____ Phone # _____

City _____ State _____ Zip _____

Job Title _____ Salary or Hourly rate _____

Supervisors' Name _____

Reason for leaving _____

Dates of Employment: From _____ To _____

Education

<u>Schools/Colleges Attended:</u>	<u># Years</u>	<u>Year Grad.</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References

Please provide 2 written references with your completed application.

I authorize any institution, government unit or other person or entity having records of information concerning me to furnish such records or information requested by duly authorized representatives of the Elkhorn Public Schools Foundation. I understand in executing this authorization I waive the right for such information to be privileged or private. Further, I certify that all information to be provided in this application is true and accurate to the best of my knowledge. I also understand that my employment is based upon information contained in this application which later proves to be false or incomplete may result in the termination of my employment.

Signature_____ Date_____