

Kids' Campus Learning Center

Application for Employment

Pre-employment Questionnaire
Equal Opportunity Employer

Date: _____

Personal Information Drivers License Number: _____ State: _____

Name: _____ Social Security Number: _____

Present address: _____

Permanent address: _____

Phone no. _____ Cell: _____

Referred by: _____

Employment Desired

Position: _____ Date you can start: _____

Are you currently employed? _____ Where? _____

Can we contact your current employer? _____

Contact name and number: _____

Education

Name and location of School	Years Attended	Did you Graduate?	Subjects Studied
Grammar School			
High School			
College			
Trade, Business or Correspondence School			

General

Special interests / training / skills	
US Military or Naval Service?	Rank:

Former Employers

Date Month / Year	Name and Address	Hourly rate	Full / Part time	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

Authorization

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing unless it is in writing and signed by an authorized company representative.

Date: _____ Signature: _____

References

Name	Phone	Business	Years known
1			
2			
3			