



Thank you for your interest in Young Leaders Learning Center!

Young Leaders Learning Center seeks to employ caring individuals who have a passion for teaching and *who* desire a career in early childhood development.

Teachers are required to complete the following task on a regular basis:

- Clean and organize the classroom area, maintaining sanitary conditions at all times
- Know and practice Young Leader Learning Centers policies and all state regulations
- Maintain daily administrative logs
- Maintain working relationships with parents to ensure a multifaceted educational experience for all children
- Attend staff meetings and in-service training
- Encourage Children and create a classroom environment that is optimal for learning and growing
- Maintain constant attendance and ensure that all children are
- supervised at all times
- Handle behavior and disciplinary issues in a calm and controlled manner. Properly notifying the director of any and all action taken.
- Conduct yourself in a professional manner when speaking to parents
- Implement curriculum in the classroom according to the standards set in place by the administration
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Teachers are paramount to the success of our programs and play important roles in the children's mental, physical and emotional development. No physical or verbal abuse of a child will ever be tolerated. Upon hiring, every employee must complete a federal background check, a state BCI report. New hires must also complete a pre-employment drug screen, show proof of up-to-date immunizations, and must review and sign all company handbooks. At this time please bring copies of all degrees, coursework and additional related training. Also provide your driver's license, social security card, references and medical statement.

Thank you again for your interest in Young Leaders Learning Center. We look forward to working with you!

Ross Location
Oxford Location

APPLICATION FOR EMPLOYMENT

NAME: _____

(Last) . (First) (Middle)

ADDRESS: _____

(Street) (City) (State & Zip)

PHONE: (____) _____

SOCIAL SECURITY NUMBER: ____-____-____

POSITION APPLIED FOR: _____

Do you have a high school diploma or its equivalent? _____

Date available for work: _____

Will you work overtime if required? _____

Will you undergo a pre-employment physical, background check and drug screening? Y / N

Have you been charged or convicted of a felony in the past (7) years? Y / N

If yes, please explain (a charge or conviction may be relevant if job-related):

May we contact your previous employer? Y / N Work Number: _____

Have you filed an application or worked here before? Y / N

If yes, give dates: to _____

Are you legally eligible for employment in this country? _____

{Proof of citizenship or legal immigration work status may be required upon employment}

Have you ever been bonded? Y / N

Type of employment desired: ___ full time ___ part time ___ temporary ___ seasonal

Are you on a lay-off and subject to recall? Y / N

Will you relocate if job requires? Y / N Will you travel if job requires? Y / N

EMPLOYMENT HISTORY

List your last two (2) employers, assignments or volunteer activities, starting with the most recent (including military experience). Explain any gaps in employment in the comments section below.

Employer: _____ Phone () _____

Address: _____

Job Title: _____

Supervisor: _____

Reason for Leaving: _____

May we contact as a reference? _____

Date employed: from _____ to _____

Nature of the work performed and responsibilities

Employer: _____ Phone () _____

Address: _____

Job Title: _____

Supervisor: _____

Reason for Leaving: _____

May we contact as a reference? _____

Date employed: from _____ to _____

Nature of the work performed and responsibilities:

EDUCATIONAL BACKGROUND

List the last three (3) schools attended, starting with the most recent one. List number of years completed, indicate degree or diploma earned, if any.

School _____ # of years completed _____

Degree or Diploma: _____

School _____ # of years completed _____

Degree or Diploma: _____

School _____ # of years completed _____

Degree or Diploma: _____

REFERENCES

List the name and telephone number of three (3) business or work references that are not related to you and are not previous supervisors. If not applicable, please list three school or personal references which are not related to you.

Name: _____

Phone () _____

Name: _____

Phone () _____

Name: _____

Phone () _____

SKILLS AND QUALIFICATIONS

Summarize any special skills and qualifications you feel may qualify you for work with our company:

List any further information you would like us to consider:

Referral source? advertisement employee relative walk-in
 government employment agency private employment agency

COMPANY STATEMENT:

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, martial or veteran status, the presence of a non-related medical condition or handicap, or any other legally protected status.

DRUG TESTING CONSENT FORM - Pre Employment

In the interest of safety and welfare in the workplace, as well as the safety of the employees and Children at Young Leaders Learning Center, I agree to undergo pre-employment drug testing for illegal substances as a condition of my employment. I recognize that in no way shall this test be used to screen out individuals taking legal/prescription medications. I give my consent to release the results of the tests) and other related medical information from the laboratory only to individuals at Young Leaders Learning Center who, pursuant to ,company rules and regulations, have a need to know of the alcohol and drug testing results. I understand the results of the test may not be used in any criminal proceeding.

I understand that if my test results are positive for illegal substances, I shall no longer be

considered employable by Young Leaders Learning Center. Should I test positive for illegal substances, I also agree to reimburse Young Leaders Learning Center the cost of the aforementioned drug test. I understand that:

The appointing authority may request proof that I am taking a controlled substance as directed pursuant to a lawful prescription issued in my name. If requested, I must provide such proof within 72 hours.

A positive test for alcohol and/or drugs, or my refusal to authorize the tests by signing this form, taking the specified tests or producing a specimen, may result in the rejection of my employment application.

Young Leaders Learning Center may require ongoing random drug testing as a condition of continued employment.

I hereby authorize a licensed drug testing organization, approved and contracted to work with Young Leaders Learning Center, to conduct such testing and to provide the results to Young Leaders Learning Center. I release Young Leaders Learning Center and the person and organization conducting the testing from liability therefore.

(Applicant Signature)

(Date)

Young Leaders Learning Center is an equal opportunity employer. We do not discriminate in our employment practices, and no question on this application shall be used for the purpose of limiting or excluding an applicant's consideration for employment on a basis prohibited by local, state or federal law.

I voluntarily consent to authorize Young Leaders Learning Center or any of its officers, employees, or agents to check my references or contact any person or entity whom they deem to be an appropriate reference. I understand that questions may be asked about my educational background, work experience, achievements, wage history, performance, attendance, personal history, character, personality, disciplinary information and reason for separation from former employment. It is expressly understood that any information given is to be used for the sole purpose of determining my acceptability for employment with Young Leaders Learning Center, and will be kept confidential within the scope of that organization.

I also hereby release Young Leaders Learning Center from all liability for damages or claims, including, but not limited to defamation, interference with contract and negligence, which may arise or result from any reference information gathered pursuant to this authorization.

It is understood and agreed that a misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

This application is current for a period of sixty (60) days. At the conclusion of this period, if you have not heard from the Employer and still wish to be considered for employment, it will be necessary for you to fill out a new application.

Signature of Applicant:

Date

AUTHORIZATION FOR BACKGROUND CHECK

I, hereby authorize Young Leaders Learning Center to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Young Leaders Learning Center will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further. I agree to reimburse Young Leaders Learning Center the cost of said background check in the event the report comes back with a conviction that would cause my application for employment to be rejected.

Signature of Employee

Date

Employee's Name – Printed