

SonShine Preschool and Daycare and Club K4
Teacher Employment Application

Full Name _____ Today's Date _____

Address _____

Phone Number _____ e-mail _____

Position Applying For: _____

Present or Previous Employer

Dates of Employment

Name of Employer _____ From _____ To _____

Address _____

Job Title and Duties _____

Reason For Leaving _____

Past Employer

Dates of Employment

Name of Employer _____ From _____ To _____

Address _____

Job Title and Duties _____

Reason For Leaving _____

School: Name/ Address Course of Study/Degree Dates Grad.

High School _____

College _____

Other _____

References: Please list 3 references with current addresses, phone numbers, either educational or professional. Do not list relatives or employees of FBC Buckner.

Name	Address	Occupation	Phone #
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Are you trained in CPR? _____ Expiration Date _____

Are you trained in First Aide? _____ Expiration Date _____

Have you recently had a tuberculin test? _____ Date _____ Result P or N

Do you have a physical condition which may limit your ability to perform normal classroom/nursery responsibilities? _____ If so, describe _____

Can you lift a five year old child without difficulty? _____

List any children/ date of birth/ do they require childcare in our facility while you work?

Name _____ DOB ____/____/____ Yes or No

Name _____ DOB ____/____/____ Yes or No

Name _____ DOB ____/____/____ Yes or No

List specific courses completed that will be helpful in early childhood _____

Why do you want to work with little children? _____

What qualities do you possess that qualify you for this job? _____

List any volunteer experience with children

Do you attend church regularly (at least 3 times a month) _____

Where is your church membership? _____

Please use a separate page and briefly share your testimony of Jesus Christ in your life.

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 immediate dismissal.

I hereby authorize First Baptist Church to conduct a criminal records check using the company/agency of their choice. I authorize them to release any information which pertains to any record of convictions contained in its files or in any criminal file maintained on me whether local, state, or national. I hereby release the agency that conducts the background check from any or all liability resulting from such disclosure.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, and release all parties from liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for the school term. Termination of the signed contract may be made by either party at any time, employee must give at least a two-week notice.

Signature _____ Date _____

Please fill out this application and also the Request Form for Background Check and return to: Bonnie Loper at First Baptist Church Buckner, 131 S Hudson St. Buckner MO 64016
preschool@fbc buckner 816-650-5632