



(Office use only)	
Date Received	

OCP Cdga.	<input type="checkbox"/>
OCP Clifton	<input type="checkbox"/>
PCS HS	<input type="checkbox"/>
OCP SA Cdga	<input type="checkbox"/>
PCS UPK	<input type="checkbox"/>
OCP SA Clifton.	<input type="checkbox"/>

APPLICATION FOR EMPLOYMENT

Position applying for: _____

Full-time Part-time Summer only

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell: _____

Email: _____

Are you able to work legally in the United States? YES NO

Do you have a valid driver's license? YES NO

Do you have access to an auto? YES NO

Are you between the ages of 18 and 65? YES NO If not, please state your age: _____

<u>Education:</u>	Major	Dates Attended	Certificate or Degree	Graduation Date
High School				
College/University/Trade School				

Licenses or certificates held, or credentials qualifying you for this employment (other than degree):

Special skills or talents:

List languages other than English _____ Computer Art

Other: _____

Membership in Professional Organizations (list):



Application for Employment (continued)

Early Childhood Education Courses Taken: Not applicable if applicant has a college degree in early childhood education or related field.

Course title/subject	No. of units

Are you presently employed? YES NO

May we contact your employer? YES NO

Have you ever been convicted of a crime? YES NO

(back ground screening will be performed as part of employment requirements)

If "YES" please explain:

Would you be willing to continue your education: YES NO

Why do you feel you are qualified for the position you are applying for?

References: Information on references must be complete (i.e. address, phone #'s)

Professional: not related to you (list at Least Two)

Name	Address	Title/Relationship	Phone No.

Personal not related to you: (list at Least Two)

Name	Address	Relationship	Phone No.



Application for Employment (continued)

Work Experience List beginning with the most recent job.

Employer Name & Address	Job Description	From/To	Salary
	Reason for Leaving	Name of Supervisor	

Employer Name & Address	Job Description	From/To	Salary
	Reason for Leaving	Name of Supervisor	

Employer Name & Address	Job Description	From/To	Salary
	Reason for Leaving	Name of Supervisor	

Volunteer or unpaid experience:

Dependent upon the position there may be job related testing required as part of the application process.

I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand that any omission or false statement made by me on this application and any supplement to it (i.e. resume, cover letter, etc.) will be sufficient grounds for failure to employ or for my discharge should I become employed with The Coordinated Child Development Program, Inc.

I understand that any employment offer will become void if the results of the state (OCFS) background checks should find me not suitable to work with or around children or if I cannot perform the job requirements and responsibilities as described in the job description.

I also understand that CCDP is an employer-at-will organization and abides by the provisions of that status, which permits the organization or the employee to terminate the employee relationship at any time for any reason.

Signature of Applicant

Date