

# HELPING HANDS NURSERY SCHOOLS PEPPERMINT TREE NURSERY SCHOOLS

## EMPLOYMENT APPLICATION

HELPING HANDS NURSERY SCHOOLS AND PEPPERMINT TREE NURSERY SCHOOLS (collectively the "Company") is an Equal Opportunity Employer. Qualified applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital status, disability, veteran status, atypical hereditary cellular or blood traits (sickle cell), or any other characteristic protected by federal, state or local law. In accordance with the law, the Company will make reasonable accommodations to the known physical or mental limitations of a qualified applicant or employee with a disability, unless the accommodation would impose an undue hardship on the operation of our business. If you require assistance to complete this form, or to participate in an interview, please let us know.

### Application Instructions

1. Please type or print neatly using a pen with black or blue colored Ink.
2. Answer all of the questions and complete all of the sections. The application must be filled out completely even if a resume is attached. If you do not understand a question, ask a company representative to assist you.
3. Read all of the information on the application carefully. Sign and date the application after you have answered all the questions, completed all of the sections, and reviewed the completed document for accuracy.
4. Return the application to the company representative. An employee of the Company will contact you if your qualifications match job openings. Applications will be kept on file for future reference and consideration for one year.

### PERSONAL INFORMATION

Name \_\_\_\_\_  
Last
First
Middle
Email Address

Other Name(s) you have used \_\_\_\_\_  
Last
First
Middle

Present Address \_\_\_\_\_  
Street
City
State
Zip Code

Previous Address \_\_\_\_\_  
Street
City
State
Zip Code

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-      (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_-      (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_-      (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_-  
 Social Security Number      Home Telephone      Business Telephone      Mobile Telephone

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ (Complete only for positions that require driving)

In the last 10 years have you been cited for any traffic violations?      Yes \_\_\_\_\_ No \_\_\_\_\_

Explain \_\_\_\_\_

I am willing to travel \_\_\_\_\_% of the time. Are you willing to relocate? Yes \_\_\_\_\_ No \_\_\_\_\_ Where: \_\_\_\_\_

Are you under 18 years of age? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, do you have a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you, after employment, submit certification of your legal right to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Pursuant to the Immigration Reform and Control Act of 1986, all applicants who are offered employment must produce documents establishing their identity and authorization for employment in the United States. These documents must be produced no later than seventy-two (72) hours after employment commences. In addition, at the time of hire, all new employees will be required to sign INS Form 1-9 (issued by the Federal government) verifying, under oath, their employment authorization.

Have you ever been convicted of any crime, misdemeanor or felony, that has not been expunged or sealed by a court\* (excluding a traffic violation) Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Where: \_\_\_\_\_ When: \_\_\_\_\_  
 Convictions are not an automatic disqualification from employment. To help us evaluate your application, please describe the nature of the offense, penalties, and your subsequent rehabilitation.

Have you ever been investigated by Child Protective Services, State Licensing or any comparable entity regarding your ability to work with children. Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
 \* In Massachusetts only: Do not answer "Yes" if your only conviction was for a misdemeanor conviction or the date you completed a related incarceration, whichever is later, that occurred more than five years ago.

**POSITION INFORMATION**

Position Desired: \_\_\_\_\_ Salary Required: \_\_\_\_\_ Date Available: \_\_\_\_\_

Would you prefer to work: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Number weekly hours required \_\_\_\_\_

Please list any scheduling preferences or limitations: \_\_\_\_\_

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_ May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

How were you referred to the company? \_\_\_\_\_

Have you or any of your relatives ever worked for the company? No \_\_\_\_\_ If Yes, Name \_\_\_\_\_

Relationship \_\_\_\_\_ Location \_\_\_\_\_ When \_\_\_\_\_

**EDUCATION**

School Name	City and State	# Years Attended	Graduate		Diploma or Degree	Major/Minor/GPA
			Yes	No		
High School						
College						
Other Education or Training						

List job related achievements, certifications, academic honors, memberships, organizations, volunteer work, special skills, except those that indicate race, religion, disability, color, national origin/ancestry, sex or age.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT HISTORY

Starting with your most recent employer, list current and all prior experience including military experience.

Employer Info.	Job Title and Responsibilities	Employment Dates	Compensation	Reason(s) for Leaving
Company Name:		From:   To:	Starting base salary:	
Address:			Ending base salary:	
City and State:			Actual Bonus Earned:	
Supervisor Name:			Other Incentives:	
Supervisor Phone #				

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