

100 Bureau Drive, Stop 1915 Gaithersburg, MD 20899 301-975-2152

## **EMPLOYMENT APPLICATION**

NIST Child Care Association is an equal opportunity employer dedicated to a policy of non-discrimination in employment on any improper basis, including race, color, age, sex, religion, national origin, citizenship, marital status, sexual orientation, and physical or mental handicap.

Position Desired:		Date Of Application/			
PERSONAL INFORMATION					
Name:		Phone: (H)			
Cell phone:	Email:				
Address:		City/State/Zip			
Social Security #		Date Available for En	nployment/_		
Preferred Hours/Days		Desired Salary			
Are you at least 18 years of age? Yes	No	Legally eligible for em	ployment in the U.S.?	Yes No	
EDUCATION AND CREDENTIALS					
College(s): Name and Location	N	/lajor	Dates Attended	Degree Earned	
Completion of 90 hr or 45 hr course or CDA	Yes	No Which o	ne?		
If not an Education Major, please list any educa	ation cou	rses you may have take	en:		
Teaching Certification and/or MSDE Credential	level des	signation:			
Describe any other education, background, exp	erience,	training and/or outsta	nding features of your pa	st employment	
which you believe will assist us in evaluating yo	our ability	to perform the duties	of the position desired		
Professional membership organizations:					

## **EMPLOYMENT HISTORY**

	Dates of employment: From/To/Position(s) held						
	Employer:City/State/Zip						
	Telephone Number:Supervisor's Name						
	Reason for Leaving:						
	May we contact this employer?YesNo Start Salary: \$ Final Salary \$  Describe your duties:						
	If you worked with children, list age level(s)/grades:						
2.	Dates of employment: From/To/Position(s) heldEmployer:						
	Address:City/State/Zip						
	Telephone Number:Supervisor's Name						
	Reason for Leaving:						
	May we contact this employer?YesNo Start Salary: \$ Final Salary \$  Describe your duties:						
3.	If you worked with children, list age level(s)/grades:  Dates of employment: From/ To/ Position(s) held  Employer:						
	Address:City/State/Zip						
	Telephone Number:Supervisor's Name						
	Reason for Leaving:						
	May we contact this employer?YesNo Start Salary: \$ Final Salary \$  Describe your duties:						
	If you worked with children, list age level(s)/grades:						
4.	Dates of employment: From/To/Position(s) heldEmployer:						
	Address:City/State/Zip						
	Telephone Number: Supervisor's Name Reason for Leaving:						
	May we contact this employer?YesNo Start Salary: \$ Final Salary \$						
	Describe your duties: That said y 5						
	If you have worked with children, list age						

crime, battery, breaking and entering, burglary, car confinement of an unattended child, contributing assistance, false imprisonment, forgery, hiring, sol distributing, of delivering a controlled dangerous disorderly house or maintaining a nuisance, kidnal manslaughter or murder, manufacturing, distribut and desertion of a spouse or minor child, perjury, distribute, or dispense a controlled dangerous sub	e or neglect of an adult, arson, assault, assault with intent to commit any irjacking, carrying or wearing a weapon, child abuse, child selling, to certain conditions or a minor delinquency, in need of supervision or iciting, engaging, or using a minor for the purpose, of manufacturing, substance, housebreaking, incest, indecent exposure, keeping a pping, maiming or mayhem, malicious destruction of property, ing or dispensing a controlled dangerous substance, criminal non-support pornography, possession of or possession with intent to manufacture, estance, prostitution or pandering, rape, reckless endangerment, robbery, r perverted practices, weapons violations of federal or state laws, cruelty Yes No
PROFESSIONAL REFERENCES	
Please list three professional references:	
Name:	Phone:
	Company:
Address:	City/State/Zip:
Name:	Phone:
	Company:
Address:	City/State/Zip:
Name:	Phone:
	Company:
Address:	City/State/Zip:
understand that false or misleading information gill understand that nothing contained in this employ NIST Child Care Association and myself for either employment have been made to me. If an employ be at-will and that I or the NIST Child Care Associate reason.  I acknowledge that consideration for employment Therefore, I authorize NIST Child Care Association application; (2) contact my former employers and (3) discuss the results of any investigation with oth I give consent for all contacted persons including for release each such person from liability for providing	ore-employment physical examinations of all employees hired for at the employee's expense.
Signature	/
	e or demand any applicant for employment or prospective employment to ar test or examination as a condition of employment. Any employer who and subject to a fine not to exceed \$100.00.
Signature	