



# APPLICATION FOR EMPLOYMENT

**NURTURING NOOK MISSION STATEMENT:** Our caregivers are responsible for creating an environment that encourages children to achieve his/her full potential in terms of physical, intellectual and psychological growth. Our caregivers provide safety and security, stimulation and encouragement, and reasonable expectations and limits. We believe children need both emotional support and structure as they meet each developmental challenge.

## PERSONAL INFORMATION

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_  
BEST TIME TO REACH YOU BY PHONE: \_\_\_\_\_

## ADDITIONAL INFORMATION

WAGE DESIRED: \_\_\_\_\_ WHEN WILL YOU BE AVAILABLE FOR WORK: \_\_\_\_\_  
HOW MANY HOURS A WEEK WOULD YOU LIKE TO WORK? \_\_\_\_\_ HOW DID YOU  
LEARN ABOUT THIS JOB? \_\_\_\_\_

## EDUCATIONAL HISTORY

HIGH SCHOOL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
YEARS OF COMPLETION: \_\_\_\_\_ GRADUATED: \_\_\_ YES \_\_\_ NO

POST HIGH SCHOOL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
YEARS OF ATTENDANCE: \_\_\_\_\_ DEGREE: \_\_\_\_\_

REGISTRY LEVEL: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

LIST ANY COURSES, WORKSHOPS, SEMINARS OR TRAINING RELEVANT TO EARLY CHILDHOOD  
EDUCATION (IF YOU DO NOT HAVE A DEGREE):

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

CPR CERTIFIED? \_\_\_\_\_ IF YES, DATE OF EXPIRATION: \_\_\_\_\_

PLEASE DESCRIBE YOUR EXPERIENCES WITH CHILDREN? (INCLUDE AGES OF CHILDREN)

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

WHAT SKILLS OR ABILITIES DO YOU HAVE THAT WOULD BE HELPFUL IN WORKING WITH CHILDREN?

---

---

---

**WORK HISTORY**

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSITION HELD: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ SALARY: \_\_\_\_\_

DUTIES AND RESPONSIBILITIES: \_\_\_\_\_

---

---

REASON FOR LEAVING: \_\_\_\_\_

MAY WE CONTACT YOUR SUPERVISOR FOR A REFERENCE? \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSITION HELD: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ SALARY: \_\_\_\_\_

DUTIES AND RESPONSIBILITIES: \_\_\_\_\_

---

---

REASON FOR LEAVING: \_\_\_\_\_

MAY WE CONTACT YOUR SUPERVISOR FOR A REFERENCE? \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSITION HELD: \_\_\_\_\_ DATES EMPLOYED: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ SALARY: \_\_\_\_\_

DUTIES AND RESPONSIBILITIES: \_\_\_\_\_

---

---

REASON FOR LEAVING: \_\_\_\_\_

MAY WE CONTACT YOUR SUPERVISOR FOR A REFERENCE? \_\_\_\_\_

WERE THERE ANY PERIODS OF TIME WHEN YOU WERE NOT WORKING? IF YES, PLEASE LIST DATES AND REASONS:

---

---

HAVE YOU EVER BEEN FIRED, DISCHARGED OR ASKED TO RESIGN FROM A POSITION? IF YES, PLEASE EXPLAIN: \_\_\_\_\_

---

---

DO YOU HAVE ANY FELONIES OR MISDEMEANORS CONVICTIONS? IF YES, PLEASE EXPLAIN:

---

---

---

CONVICTIONS OR PENDING ARRESTS ARE NOT AN ABSOLUTE BAR TO EMPLOYMENT WITH NURTURING NOOK. THEY WILL BE CONSIDERED ONLY IF THERE IS A SUBSTANTIAL RELATIONSHIP TO THE CIRCUMSTANCES OF THE POSITION FOR WHICH YOU ARE APPLYING.

**REFERENCES**

LIST ANY SUPERVISORS, EMPLOYERS OR UNIVERSITY INSTRUCTORS THAT MAY BE CONTACTED AS A REFERENCE. PLEASE DO NOT LIST FRIENDS AND RELATIVES.

NAME: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ BEST TIME TO CALL: \_\_\_\_\_

NAME: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ BEST TIME TO CALL: \_\_\_\_\_

NAME: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ BEST TIME TO CALL: \_\_\_\_\_

DO YOU GIVE THE NURTURING NOOK PERMISSION TO VERIFY ALL OF THE INFORMATION PROVIDED ON THIS APPLICATION? \_\_\_\_\_

**THE NURTURING NOOK DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, NATIONALITY, RELIGIOUS BELIEFS, MARITAL STATUS OR SEXUAL ORIENTATION.**

**I UNDERSTAND THAT AN ACCEPTANCE OF AN OFFER OF EMPLOYMENT IS CONTINGENT UPON THE PRELIMINARY AND FINAL APPROVAL OF THE WISCONSIN DEPARTMENT OF CHILDREN AND FAMILIES RUN BACKGROUND CHECK.**

**I CERTIFY THAT THE INFORMATION PROVIDED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT IF I AM EMPLOYED BY THE COMPANY, FALSE STATEMENTS OR OMISSIONS CAN RESULT IN IMMEDIATE TERMINATION, AND I AGREE THAT THE COMPANY SHALL NOT BE HELD LIABLE IN ANY RESPECT IF MY EMPLOYMENT IS TERMINATED FOR THAT REASON.**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_