



Dear Applicant,

Thank you for your interest in employment with Young Scholars Academy Learning Center. We welcome your application for a position. Currently, we are using the same application form for all positions at the center. Please be sure to name all ages you are prepared to teach in order of preference. You will be considered for any position that may become open in your area of expertise.

An applicant file must contain the following information:

1. Completed application
2. Three letters of reference
3. College transcripts or a copy of the highest degree earned
4. CDA or any certificate that qualifies you for the position applied for
5. Verification of all hours that you have worked in a child care setting
6. First aid and CPR
7. A fingerprint card with fingerprints

Applicant files will be considered active for a maximum of 90 days. During that time, you are welcome to update it whenever necessary. If you wish to be considered for employment after that time, you must reapply.

If you have any questions or concerns, please do not hesitate to give us a call. Thank you for your time and interest.

Sincerely,

Young Scholars Academy Administration



## APPLICATION FOR EMPLOYMENT

Please Print

Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_

### HOW WERE YOU REFERRED TO US? (Circle one)

|              |           |                  |
|--------------|-----------|------------------|
| Newspaper Ad | School    | Current employee |
| Agency       | On my own | Other            |

Name of referral source: \_\_\_\_\_

Do you work or have you worked in a Child Care Industry? (Circle One) Yes No

Do you know of anything which would obstruct your obtaining employment in the child care industry? (Circle One) Yes No

Have you ever worked in a facility or with a company that, to your knowledge, has had a license revoked, or its license suspended in any state or has been the subject of a disciplinary action or incurred a fine during your employment in that facility/company? (Circle One) Yes No

**Please note:** This application was designed for use by professional, technical, and administrative personnel. Answer the questions to the best of your ability. All information will be treated confidentially.

\_\_\_\_\_ **DO NOT WRITE BELOW THIS LINE** \_\_\_\_\_

Reviewed by \_\_\_\_\_ Date: \_\_\_\_\_  
Called for Interview Yes No Came in for Interview: Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Remarks \_\_\_\_\_  
Neatness \_\_\_\_\_ Character \_\_\_\_\_ Personality \_\_\_\_\_ Ability \_\_\_\_\_  
Hired Yes No \_\_\_\_\_ Start Date: \_\_\_\_\_ Salary \_\_\_\_\_  
Not Hired: \_\_\_\_\_  
Review Application for different position at a later Date: \_\_\_\_\_  
Review Date: \_\_\_\_\_ Position \_\_\_\_\_ Hired: Yes No



**MILITARY EXPERIENCE:**

Were you in the U.S. Armed Forces? (Circle One) Yes No If yes, what branch? \_\_\_\_\_  
Dates of duty: From: \_\_\_\_\_ To: \_\_\_\_\_ Rank at separation: \_\_\_\_\_  
Briefly describe your duties: \_\_\_\_\_

Have you ever been arrested or charged with a crime involving a child or been asked to resign or been de-certified for a sexual offense? (Circle One) Yes No

Have you ever been convicted of a criminal offense: (Circle One) Yes No  
If yes, what was the date: \_\_\_\_\_ Place: \_\_\_\_\_  
What was the nature of the offense? \_\_\_\_\_

\*You will need to supply documentation that this offense has been dropped or restitution has been made.\*

\*An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.\*

Have you ever applied for employment with this center? (Circle One) Yes No  
If yes, what was the date? \_\_\_\_\_

Have you previously been employed by this company? (Circle One) Yes No  
If yes, when? \_\_\_\_\_

**GENERAL INFORMATION:**

Are you legally authorized to work in the United States? (Circle One) Yes No

Are you under the age of 18? (Circle One) Yes No

Do you know any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommodation? (Circle One) Yes No  
If yes, explain: \_\_\_\_\_

Please indicate any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, etc. (You may exclude all information indicative of age, sex, race, religion, color, national origin, or disability.)

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

**EMPLOYMENT HISTORY:**

Begin with most recent employer.

Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_  
Job Title: \_\_\_\_\_  
Salary: Start \_\_\_\_\_ End \_\_\_\_\_      Dates: Start \_\_\_\_\_ End \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact this employer? (Circle One)    Yes    No

Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_  
Job Title: \_\_\_\_\_  
Salary: Start \_\_\_\_\_ End \_\_\_\_\_      Dates: Start \_\_\_\_\_ End \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact this employer? (Circle One)    Yes    No

Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_  
Job Title: \_\_\_\_\_  
Salary: Start \_\_\_\_\_ End \_\_\_\_\_      Dates: Start \_\_\_\_\_ End \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
May we contact this employer? (Circle One)    Yes    No

**REFERENCES: (At least three – not employers or relatives)**

| Name & Address | Occupation | Relationship | Phone Number |
|----------------|------------|--------------|--------------|
|                |            |              |              |
|                |            |              |              |
|                |            |              |              |

May we contact these references? (Circle One)      Yes      No

Person to be notified in case of an emergency:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**APPLICATION AGREEMENT: (Please read the following statements carefully)**

I hereby affirm that the information provided on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I further understand that any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly.

I authorize Young Scholars Academy or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, and local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to Young Scholars Academy or its duly authorized representative pursuant to this authorization for any liability, claims, changes, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability Young Scholars Academy and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license from the state of Colorado and liability insurance in an amount equal to the minimum required by the state of Colorado.

I understand that Young Scholars Academy may now have, or may establish a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If Young Scholars Academy has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. May be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a

condition of continual employment and I agree to undergo alcohol and drug testing consistent with Young Scholars Academy's policies and applicable federal, state, and local law.

If employed by Young Scholars Academy, I understand and agree that Young Scholars Academy, to the extent by Federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign confidentiality, restrictive covenant, and/or conflict of interest statement, as well as, an agreement to arbitrate.

I authorize all of the persons, schools, my current employer (if applicable) and previous employers and organizations named in this application (and accompanying resume', if any) to provide to Young Scholars Academy any relevant information that may be required to arrive at an employment decision.

I understand that I may be required to take a lie detector test at the expense of Young Scholars Academy. Should I refuse to take such a test, Young Scholars Academy may terminate my employment at-will.

**YOUNG SCHOLARS ACADEMY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE YOUNG SCHOLARS ACADEMY COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT – EXPRESS OR IMPLIED – WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME, UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.**

**IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF YOUNG SCHOLARS ACADEMY, AND I UNDERSTAND THAT YOUNG SCHOLARS ACADEMY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.**

I understand that the first 180 days of my employment will be considered a training period, during which SICK and Vacation benefits shall not accrue, and that my employment can be terminated, with or without cause at any time during such training period or thereafter, at the discretion of either *Young Scholars Academy* or myself.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that Young Scholars Academy, to the extent permitted by federal, state, and local law, and test the applicant for illegal or controlled substances, conduct inspections of property without notice, and communicate test results to Young Scholars Academy personnel who needs to know, the applicant's parent or the applicant's legal guardian.

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_