

# DAY CARE STAFF DATA SHEET

NAME OF DAY CARE FACILITY:	SATELLITE SITE:
YOUR NAME:	DATE OF BIRTH:
ADDRESS:	TELEPHONE NO.:

## EDUCATION

NAME OF HIGH SCHOOL:	GRADE COMPLETED:
ADDRESS:	DATE COMPLETED:
NAME OF COLLEGE:	SEMESTER HOURS COMPLETED:
ADDRESS:	DEGREE EARNED:

PLEASE ATTACH TRANSCRIPT

## EMPLOYMENT EXPERIENCE

**Please list your three most recent employers, dates of employment, and describe the type of work you performed. Continue on the reverse side if necessary.**

NAME OF EMPLOYER:		
ADDRESS:		
DATES OF EMPLOYMENT: START:                      END:	JOB DESCRIPTION:	TITLE:
NAME OF EMPLOYER:		
ADDRESS:		
DATES OF EMPLOYMENT: START:                      END:	JOB DESCRIPTION:	TITLE:
NAME OF EMPLOYER:		
ADDRESS:		
DATES OF EMPLOYMENT: START:                      END:	JOB DESCRIPTION:	TITLE:

## PRESENT POSITION

**In the spaces below, please complete information regarding the position for which you are applying or for which you have been hired:**

- |  |   |                                       |                                |
|--|---|---------------------------------------|--------------------------------|
| <input type="checkbox"/> ADMINISTRATOR | <input type="checkbox"/> GROUP SUPERVISOR           | <input type="checkbox"/> AIDE         | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> DIRECTOR      | <input type="checkbox"/> ASSISTANT GROUP SUPERVISOR | <input type="checkbox"/> FOOD SERVICE |                                |

IF OTHER, PLEASE SPECIFY:	DATE YOU CAN START:
DAYS OF WEEK YOU WILL BE AVAILABLE FOR WORK:	HOURS OF THE DAY YOU WILL BE AVAILABLE FOR WORK:

\_\_\_\_\_  
SIGNATURE OF APPLICANT/EMPLOYEE

\_\_\_\_\_  
DATE SIGNED

**\*FOR EMPLOYER'S USE:** Employee's starting date in a child care position

MO.	DAY	YEAR