

APPLICATION FOR EMPLOYMENT with Thrive Preschool, a ministry of Thrive Christian Church - Westfield, Indiana

We consider all applicants for all positions without regard to race, color, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Personal Information					
Name (Last Name First)			Social Security No.		
Address		City		State	Zip
Home Phone	Cel Phone	Email		4	4
Emergency Contact Name			Phone		

Position Applied For
Job Title(s):
Class/Age OR Days Preferred:
Available Start Date:

Education				
Type of School	Name and Location of School	Years Completed	Diploma, Degree, and Major	
High School				
College				
Grad School				
Trade or Business School				

Work Experience (list employers starting with the most recent)						
Employer						
Address			City	State	Zip	
Start Date	End Date	Job T	o Title			
Supervisor:	pervisor: Phone					
Description of	Work					
		1				
Reason for Lea	aving					

Work Experience (list employers starting with the most recent) Employer Address City State Zip Address Image: City State Zip Start Date End Date Job Title Phone Supervisor: Phone Description of Work Phone

Reason for Leaving

Other Skills Or Experience (not included above)

Personal References				
Name	Address	Phone	Relationship & Years known	

Agreement

I authorize the investigation of all statements contained in this employment application form. I understand that if I am hired, any misrepresentation or omission of facts is cause for immediate dismissal at any time. I hereby give the Company/Organization permission to contact any or all schools, previous employers (unless otherwise indicated), and references and hereby release the Company/ Organization from any liability as a result of such contract.

I understand that a criminal background check will be performed, and employment may be based on the results of this check.

I further understand that my employment with Thrive Preschool is "at will," meaning it can be terminated at will for any reason and at any time by myself or the Company/Organization.

Signature of applicant:

Date:_____

This Company/Organization is an equal employment opportunity employer.