



WILMINGTON HEAD START, INC.

Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Human Resources Department.

Positions(s) applied for _____ Date of application ____/____/____

Name: _____ Referred by: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone # (____) _____ Cell Phone # (____) _____

Date available for work _____ What is your desired salary range? \$ _____

Type of employment desired Full Time Part-Time Seasonal Substitute

Have you ever been employed here before? Yes No If yes, give dates and positions _____

Are you a current or past Head Start parent? Current Former Neither

For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Are you willing to accept employment, which requires you to travel? Yes No

Driver's license number if driving is an essential job function _____ State _____

Have you ever plead "guilty" or "no contest" to, or been convicted of a crime? Yes No If yes, Please provide date(s) and details _____

ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT

EMPLOYMENT HISTORY

Provide the following information of your past four (4) employers, assignments or volunteer activities, starting with the most recent.

FROM TO EMPLOYER TELEPHONE #
____/____ ____/____ _____ (____) _____

Starting job title/final job title _____ Immediate supervisor and title _____

Address _____

Summarize the nature of work performed and job responsibilities _____

May we contact for reference? Yes No Later Reason for leaving _____

Hourly rate/salary \$ _____ \$ _____
Start Per Final Per

AN EQUAL OPPORTUNITY EMPLOYER

FROM _____ TO _____ EMPLOYER _____ TELEPHONE # _____
 ()

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EDUCATIONAL BACKGROUND

Name & Location	Number of Years Completed	Did you Graduate		Course of Study	
		Yes	No	Major	Degree
High School/GED		Yes	No		
College		Yes	No	Major	Degree
Other		Yes	No	Major	Degree

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying _____

Are you computer literate? Yes No Are you internet literate? Yes No

Are you bilingual? Yes No If yes, check all that apply Speak Read Write Language: _____

REFERENCES (Non Relative)

Name	Complete Mailing Address	Telephone #	Number of Years Known

APPLICANT STATEMENTS

- I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.
- I understand that the employer does not unlawfully discriminate in employment and no question on this application issued for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.
- If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.
- I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete and I-9 Form in this regard.
- I hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of Wilmington Head Start, Inc. I understand that all information on this application is subject of verification and I consent to criminal history background checks. I also consent that you may contact references, former employers and educational institutions listed regarding this application. I further authorize Wilmington Head Start, Inc. to rely upon and use, as it sees fit, any information received from such contacts

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENTS.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statements.

Signature of Applicant _____ Date ____/____/____