



**JOB APPLICATION**

*If not completing this application online, please print clearly in blue or black ink.*

**PERSONAL INFORMATION**

LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

OTHER NAMES USED: \_\_\_\_\_

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

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAILING ADDRESS, IF DIFFERENT FROM CURRENT ADDRESS:

\_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_ MOBILE TELEPHONE: \_\_\_\_\_

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

Are you over 18 years of age?  YES  NO

If you are under 18 years of age, are you a high school graduate?  YES  NO

Are you legally eligible for permanent employment in the U.S.?  YES  NO

*If hired, verification will be required by law.*

**POSITION (S) APPLYING:**  FULL TIME  PART-TIME

PRESCHOOL TEACHER  SCHOOL AGE TEACHER  PE COACH

PRESCHOOL ASSISTANT  SCHOOL AGE ASSISTANT

TEMPORARY ON-CALL TEACHER  TEMPORARY ON-CALL ASSISTANT

SPECIALIST POSITION  HEAD TEACHER

SITE DIRECTOR  ASSISTANT SITE DIRECTOR

CLERICAL  ADMINISTRATIVE POSITION

Date you are first available to start work: \_\_\_\_\_

Salary or hourly wages desired: \$ \_\_\_\_\_  Hourly  Monthly  Annually



Footsteps Child Care, Inc.

374 El Camino Real Belmont, California 94002

T: 650.610.0715 F: 650.610.0751 E: office@footstepschildcare.org W: footstepschildcare.org Tax ID: 94-3206278

**EDUCATIONAL BACKGROUND**

• **NAME OF SCHOOL:** \_\_\_\_\_

CITY: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

DEGREE/CREDENTIAL: \_\_\_\_\_

• **NAME OF SCHOOL:** \_\_\_\_\_

CITY: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

DEGREE/CREDENTIAL: \_\_\_\_\_

• **NAME OF SCHOOL:** \_\_\_\_\_

CITY: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

DEGREE/CREDENTIAL: \_\_\_\_\_

• **APPLICABLE COURSEWORK FOR POSITION:**

COURSE OR CLASS TITLE: \_\_\_\_\_ DATE COMPLETED: \_\_\_\_\_

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**SKILLS AND INTERESTS**

• Do you speak a foreign language?  YES  NO

Which language(s) \_\_\_\_\_

Level of Fluency: Native Speaker  YES  NO

Speak Fluently  YES  NO Written Fluency  YES  NO

• Do you play a musical instrument?  YES  NO

Which one(s) \_\_\_\_\_

• Other interests, hobbies, skills, and talents:

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

• Please state why you are applying for this position and what you can offer to this organization

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

**EMPLOYMENT HISTORY**

Are you currently employed?  YES  NO

If you are currently employed, may we contact your current employer?  YES  NO

**Please describe present and past employment positions, beginning with your recent employment, dating back five years. Please account for all periods of unemployment. You may use additional paper if necessary.**

*Even if you attach or include a resume, this section must be completed.*

• **DATES OF EMPLOYMENT:** START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

**NAME OF EMPLOYER:** \_\_\_\_\_

BUSINESS TYPE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

RESPONSIBILITIES & DUTIES:

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

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

NAME OF SUPERVISOR: \_\_\_\_\_ TITLE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER FOR REFERENCES?  YES  NO

NAME OF PERSON TO CONTACT: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

• **DATES OF EMPLOYMENT:** START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

**NAME OF EMPLOYER:** \_\_\_\_\_

BUSINESS TYPE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATES OF EMPLOYMENT: START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

RESPONSIBILITIES & DUTIES:

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

NAME OF SUPERVISOR: \_\_\_\_\_ TITLE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER FOR REFERENCES?  YES  NO

NAME OF PERSON TO CONTACT: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

• **DATES OF EMPLOYMENT:** START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

**NAME OF EMPLOYER:** \_\_\_\_\_

BUSINESS TYPE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

NAME OF SUPERVISOR: \_\_\_\_\_ TITLE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

RESPONSIBILITIES & DUTIES:

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

DATES OF EMPLOYMENT: START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

MAY WE CONTACT THIS EMPLOYER FOR REFERENCES?  YES  NO

NAME OF PERSON TO CONTACT: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**REFERENCES:**

- Please list three references – Two must be professional references, not relatives or friends

1. NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

2. NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

3. NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

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Footsteps Child Care is an Equal Opportunity Employer. Footsteps Child Care does not discriminate on the basis of race, religion, color, sex, age, national origin, disability, perceived gender, gender identity, or gender expression. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

Are you able to perform the essential functions of the job for which you are applying, either with/without reasonable accommodation?

YES       NO      If no, please describe the functions that cannot be performed:

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

Footsteps Child Care, Inc. is an At-Will Employer. The first ninety (90) days of employment is an “introductory period.” This means that regardless of any provision in the Employee Handbook, either you or Footsteps Child Care may terminate the employment relationship at any time, for any reason, with or without cause or notice.

\_\_\_\_\_ *Please Initial*

I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in and furnished to Footsteps Child Care. I understand this application does not constitute an employment contract of any kind.

\_\_\_\_\_ *Please Initial*

Footsteps Child Care has my permission to obtain all necessary information from the references I have listed, or from any other sources, concerning my prior employment and personal history or credit standing and I release all parties from any possible damages resulting from disclosing such information with or without prior written notices to me.

Footsteps Child Care has my authorization to conduct pre-employment testing, not limited to classroom practicum, fingerprint clearance, computer skills testing, drug testing, and van driving.

The above information is true and complete to the best of my knowledge. Should I be employed by the company, any misrepresentation or false statement contained herein may be considered cause for possible dismissal.

This application will remain active and valid for sixty (60) days until the open position is filled.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*