



APPLICATION FOR EMPLOYMENT

Our mission: ***“Working with parents and the community to provide high quality child care and education to the children of Los Angeles County”.***
 California Children’s Academy is a strong believer in equal opportunity for all. California Children’s Academy is a diverse organization which values the uniqueness that each person brings to fulfill our mission. We consider applicants for all positions without regard to race, color, religion, gender, sexual orientation, national origin, age, marital status, or any other legally protected status. We also make every reasonable effort to accommodate applicants with disabilities.

(PLEASE PRINT)

Position(s) Applied For	Date of Application			
How Did You Learn About Us?				
<input type="checkbox"/> Advertisement <input type="checkbox"/> Relative <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Other _____				
Last Name	First Name	Middle Name		
Address				
<i>Number</i>	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Telephone Number(s)				

Are you over the age of 18 years? Yes No

Have you ever filed an application with us before? If Yes, give date _____ Yes No

Have you ever been employed with us before? If Yes, give date _____ Yes No

Do any of your friends or relatives, other than spouse, work here? Yes No

If yes, please give - Name: _____ Campus: _____

Are you currently employed? Yes No

If presently employed, why are you considering leaving? Explain: _____

Are you authorized to legally work in the United States? Yes No
(Proof of identity and eligibility will be required upon employment)

Date available for work: ____/____/____

Are you available to work: Full Time Part Time (Hours) _____ On call Overtime

Are you currently on “lay-off” status and subject to recall?..... Yes No

Can you travel if a job requires it? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
 2701 N. Main St. Los Angeles, CA 90031 – 323-223-3313

EDUCATION

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate School				
Trade, Professional School or Other				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military. (if applicable)

TEACHING APPLICANTS ONLY

If applying for a Teaching position: List any special permits, certificates, and/or credentials (*include expiration dates*), number of CDE units, etc.

SPECIALIZED SKILLS (CHECK SKILLS/EQUIPMENT OPERATED)

- PC/MAC
 MICROSOFT WORD
 EXCEL
 BILINGUAL SKILLS/(LANGUAGES): _____
 TYPING WPM _____
 10-KEY
 OTHER: _____

ADDITIONAL SKILLS:

NOTE TO APPLICANT: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB WHICH YOU ARE APPLYING.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? _____ YES _____ NO

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number (s)				
Job Title	Supervisor			
Reason for Leaving:				
May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

2.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number (s)				
Job Title	Supervisor			
Reason for Leaving:				
May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

3.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number (s)				
Job Title	Supervisor			
Reason for Leaving:				
May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

PROFESSIONAL REFERENCES

I, _____, authorize the **PROFESSIONAL** references listed below as well as any other letter of references provided, whom California Children's Academy contacts, to provide California Children's Academy any and all information concerning my previous employment and any other pertinent information that they may have.

Applicant's Signature

Please provide the names, titles, and telephone numbers of at least three **professional references** *not related to you*:

- | | |
|----------------|----------------|
| 1. Name: _____ | Company: _____ |
| Title: _____ | Phone #: _____ |
| 2. Name: _____ | Company: _____ |
| Title: _____ | Phone #: _____ |
| 3. Name: _____ | Company: _____ |
| Title: _____ | Phone #: _____ |

APPLICANT'S STATEMENT

PLEASE READ AND INITIAL EACH PARAGRAPH BELOW.

I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that misrepresentation may be cause for dismissal. I expressly authorize, without reservation, California Children's Academy, its representatives, employees or agents to contact and obtain information for all references (personal and professional), current/prior employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in the application, resume or job interview. I hereby waive any rights I may have regarding California Children's Academy, its agents, employees and representatives. Further, an employment offer is contingent on California Children's Academy's approval of the results of a pre-employment screening method that may include any applicable physical, drug/alcohol screening, fingerprinting, criminal background check, or any combination of the screening methods thereof. Also, any offer is contingent on my being able to prove that I have the legal right to work in the United States. I also understand that I am required to abide by all the rules, regulations and policies of California Children's Academy. _____

(Applicant's Initials)

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and California Children's Academy may discharge the employee at any time with or without cause. No expectancy to continue employment will be created irrespective of the length of service by the employee. It is further understood that this "at will" employment relationship cannot be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Executive Director of California Children's Academy. _____ **(Applicant's Initials)**

If in the course of my employment with California Children's Academy I am required to drive a company vehicle, I understand that I must have and maintain a good driving record and be insurable in order to retain the position. I also understand that if I have a job requiring that I drive my personal vehicle, I am expected to adhere to state law by insuring it in order to retain the position. _____ **(Applicant's Initials)**

Please be advised that all prospective employees of California Children's Academy are required to undergo background checks and fingerprints with the Department of Social Services, Community Care Licensing and receive clearances from both the FBI and the Department of Justice before they can work with children. Persons with convictions of serious misdemeanors and felonies will not be cleared and may not be hired.

Applicant's Signature

Date