

### **The Center**

### **Early Childhood Programs**

### **Lake County School District R-1**

# Please return this employment application with the following documentation. Only complete applications will be accepted.

- Three letters of recommendation with name, address and contact telephone number of reference
- Documentation from employer(s) of experience in the care and supervision of young children
- Upon hiring, we will ask for a copy of college transcripts and a copy of college degree or certificate

Please leave this page attached to application.	Write	"n/a"	on any of	the abov	ve check
boxes which do not apply.					

Date received:	Received by (staff member):



# The Center Early Childhood Programs Lake County School District R-1

### **Application for Employment**

Personal Information								
Name								
		Last First		Middle	<del></del>			
Auuress		Number and Street	<del> </del>		City	State	ZIP code	
Phone _		 Home	Wor		<del></del> -	Cell		
			Years		Address:	Cell		
Have yo	u ever be	en convicted of a crime?	Yes	N	lo If yes, please	explain:		
List pendi	ing and pric	or arrests including any charges	related to child	d abuse:				
Have yo	u ever wo	rked for The Center or La	ke County So	chool Dis	trict? Y	es No		
If yes: W	es: When? Where?			Position held?				
		Positio	n Desired (	check as r	nany as apply)			
	Adminis	trative (please specify-)						
	Preschool Teacher				Preschool sup	reschool support staff		
	Substitute				Other:			
	Volunteer							
Pa	rt-time	Full time				· 		
	T	Related Skills a						
	-	ildhood Tchr or Assist. Ea				ado Rules and R	egulations	
		re Director qualified per (	Lolorado Chil	d Care r	egulations			
	Office skills-							
Other skills and/or qualifications-  Do you speak any language other than English? Yes No								
=	speak any hat langu				 Written	?		
, 00, 11			ducation a			·		
Lev	vel		nd Location			Maj	jor	
High S	School							
Coll	ege							
Trade	School							
Busines	s School							
Oth	her							

Employment History (list most recent first)							
May we contact your current employer? Yes No Comment-							
Most recent employer							
Employer			Emp	oloyed	Dutie	es and resp	onsibilities-
Address							
Position			From				
Supervisor					Reas	on for leav	ing-
Phone			To				
		Previ	ous employe	r	,		
Employer			Employed		Duties and responsibilities-		
Address							
Position			From		Reason for leaving-		
Supervisor							ing-
Phone							
		Previ	ous employe		1		
Employer			Emp	oloyed	Dutie	Duties and responsibilities-	
Address							
Position			From				
Supervisor				F		Reason for leaving-	
Phone		То					
		Re	ferences				
	List thre	ee people qualified to comme	nt on your al	bilities and yo	ur past	t experienc	ce
Name	e	Address		Position		า	Phone
Please read the statement below and sign and date this form indicating that you have read and understood the following statement:							
"Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly."							
I certify that all information is correct and complete and understand that employment is contingent upon its accuracy.							
Signature				Date			
	FOLIAL	OPPORTLINITY EMPLOYER	Thank you	for vour into	roct in	our scho	ما

**AL OPPORTUNITY EMPLOYER** Thank you for your interest in our school.

The Lake County School District complies with all ADA requirements and will offer reasonable accommodations to any employee meeting the criteria. Please contact HR Director for requests. The Lake County School District does not discriminate on the basis of race, color, national origin, sex, or disability in its programs or activities. A lack of English skills will not be a barrier to admission or participation. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Kathleen Fitzsimmons, HR Director, 328 W. 5th Street, Leadville, CO 80461; 719-486-6811 or kfitzsimmons@lakecountyschools.net

# Employee Experience in Care and Supervision of Children (Documentation from employer must be attached)

Name-			Date Completed-				
Dates of			Ages of Children	Hours Employed			
Employment	Employer	Your Position		Hours per day	Days per week	Weeks	