



Bartonville  
 3208 FM 407E  
 Bartonville, TX 76226  
 Phone: 940-455-7123

### EMPLOYMENT APPLICATION

FIRST NAME	MIDDLE NAME	LAST NAME	TODAY'S DATE
ADDRESS			POSITION APPLYING FOR
			HOME PHONE
CITY	STATE	ZIP	CELL PHONE / PAGER #
SOCIAL SECURITY #			ARE YOU 18 YEARS OR OLDER?

WHICH DAYS ARE YOU AVAILABLE TO WORK (Please check all that apply):

Monday     Tuesday     Wednesday     Thursday     Friday

WHAT TIMES ARE YOU **NOT** AVAILABLE TO WORK? \_\_\_\_\_

DATE YOU CAN BEGIN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      SALARY REQUESTED \_\_\_\_\_

WILL YOU ACCEPT? (CHECK IF YES):

Full Time     Part Time     Temporary     School Months Only     As Needed / Substitute

HAVE YOU EVER BEEN EMPLOYED BY PREMIER ACADEMY? [ ] YES [ ] NO

IF SO, GIVE DATE \_\_\_\_\_ JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

DO YOU HAVE ANY RELATIVES WORKING FOR PREMIER ACADEMY? [ ] YES [ ] NO

RELATIVES NAME/S \_\_\_\_\_

CAN YOU PROVIDE PROOF OF CITIZENSHIP, VISA, OR ALIEN REGISTRATION # UPON EMPLOYMENT? [ ] YES [ ] NO

HOW DID YOU LEARN OF THIS POSITION? \_\_\_\_\_

### EDUCATION

DID YOU GRADUATE FROM HIGH SCHOOL OR RECEIVE A G.E.D.? [ ] YES [ ] NO DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ G.P.A. \_\_\_\_\_

NAME & LOCATION OF HIGH SCHOOL ATTENDED \_\_\_\_\_

COLLEGE OR VOCATIONAL SCHOOL AND LOCATION	DATES FROM/TO	MAJOR STUDIED	DEGREE EARNED

OTHER CHILDCARE RELATED COURSES AND TRAINING DATES


DO YOU HAVE A VALID TEXAS STATE DRIVER'S LICENSE # ?  YES  NO  
ARE YOU WILLING TO DRIVE THE CENTER BUS FOR FIELD TRIPS AND BEFORE / AFTER SCHOOL TRANSPORTATION?  YES  NO  
DO YOU HAVE A TEXAS FOOD SERVICE WORKER PERMIT?  YES  NO  
ARE YOU WILLING TO PREPARE LUNCHES AND SNACKS IF NEEDED?  YES  NO  
DO YOU HAVE A CURRENT FIRST AID/CPR CARD?  YES  NO  
DO YOU HAVE A CURRENT INFANT-CHILD CARDIOPULMONARY RESCUSITATION (CPR) CARD?  YES  NO

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HAVE YOU EVER HAD A PROTECTIVE ORDER ISSUED AGAINST SOMEONE?  YES  NO  
HAVE YOU EVER HAD A PROTECTIVE ORDER ISSUED ON YOURSELF?  YES  NO  
DESCRIBE THE NATURE \_\_\_\_\_

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HAVE YOU EVER FILED A CLAIM FOR WORKER COMPENSATION?  YES  NO  
DESCRIBE THE NATURE AND DURATION \_\_\_\_\_

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HAVE YOU EVER HAD ANY MOTOR VEHICLE CITATIONS?  YES  NO  
DESCRIBE THE NATURE AND DATES \_\_\_\_\_

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HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE WHICH RELATES REASONABLY TO CREDIBITLIY OR FITNESS TO PERFORM  
THE JOB YOU ARE APPLYING FOR?  YES  NO

OFFENSE \_\_\_\_\_ DATE \_\_\_\_\_

I AUTHORIZE THE INVESTIGATION OF ALL MATTERS WHICH PREMIER ACADEMY DEEMS RELEVANT TO MY QUALIFICATIONS FOR EMPLOYMENT. THIS INCLUDES ALL STATEMENTS MADE IN THIS APPLICATION AND IN ANY ATTACHMENTS OR SUPPORTING DOCUMENTS. I AUTHORIZE YOU TO REQUEST AND RECEIVE SUCH INFORMATION AND I RELEASE FROM ALL LIABILITY ANY PERSONS (SUCH AS FORMER SUPERVISORS OR EMPLOYERS) SUPPLYING IT. I ALSO RELEASE PREMIER ACADEMY FROM ALL LIABILITY, WHICH MIGHT RESULT FROM MAKING THE INVESTIGATION.

I CERTIFY THE FACTS AND INFORMATION IN THIS APPLICATION AND IN ANY ATTACHMENTS OR SUPPORTING DOCUMENTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSIFICATION, MISREPRESENTATION OR OMISSION, AS WELL AS ANY MISLEADING STATEMENTS OR OMISSIONS, WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION, REGARDLESS OF WHEN OR HOW DISCOVERED.

I UNDERSTAND THAT I MAY RESIGN OR BE TERMINATED, WITHOUT CAUSE OR NOTICE, AT ANY TIME. I ALSO UNDERSTAND THAT PREMIER ACADEMY MAY CHANGE, WITHDRAW AND INTERPRET OTHER POLICIES (INCLUDING BUT NOT LIMITED TO WAGES, HOURS AND WORKING CONDITIONS) AS IT DEEMS APPROPRIATE. I UNDERSTAND THAT REGULAR AND PUNCTUIONAL ATTENDENCE AND OVERTIME AS REQUESTED, IS A REQUIREMENT FOR THIS POSITION.

I HAVE READ EACH OF THE ABOVE STATEMENTS. I HAVE ALSO REVIEWED ALL OF THE INFORMATION I PROVIDED IN THIS APPLICATION AND IN ANY ATTACHMENTS OR SUPPORTING DOCUMENTS.

YES  NO

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SIGNATURE

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DATE

## PREVIOUS EMPLOYMENT

START WITH YOUR PRESENT OR LAST JOB. INCLUDE ANY JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES FOR THE PAST 10 YEARS

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EMPLOYER \_\_\_\_\_ START DATE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ END DATE \_\_\_\_\_  
CITY, STATE & ZIP \_\_\_\_\_ BEGINNING WAGE \_\_\_\_\_  
POSITION TITLE \_\_\_\_\_ ENDING WAGE \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_ MAY WE CONTACT? \_\_\_\_\_  YES  NO  
WORK PERFORMED \_\_\_\_\_

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