

WAVERLY CHILD CARE & PRESCHOOL APPLICATION

Date _____

Name _____

Address _____

Home Telephone _____ Cell Phone _____

E-Mail Address _____

EMERGENCY CONTACT INFORMATION:

| Name | Address | Phone |
|-------|---------|-------|
| _____ | _____ | _____ |

EDUCATION:

| High School | Location | Years Attended | Degree |
|-------------|----------|----------------|--------|
| _____ | _____ | _____ | _____ |

| College | Location | Years Attended | Degree |
|---------|----------|----------------|--------|
| _____ | _____ | _____ | _____ |

WORK EXPERIENCE: (last three places of employment or those providing the child care experience)

| Employer | Address | Phone | Type of work/Dates | Email |
|----------|---------|-------|--------------------|-------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ |

Please note with a * if this employment is an internship, field placement or student teaching.

PERSONAL REFERENCES:

| Name | Address | Phone | Email | Occupation |
|----------|---------|-------|-------|------------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |

Health: _____ **Date of last physical** _____

~ Do you have a record of founded child or dependent adult abuse or have you ever been convicted of a crime, in this state or any other state? Yes ___ No ___

Please attach a current resume if available.

High School and College students attach a current class schedule.