



**Early Learning Coalition of Manatee County, Inc.  
Employment Application**

**Applicant Information**

Full Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address City ST Zip Code

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Salary Range: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? Yes  No

If no, are you authorized to work in the U.S.? Yes  No

Have you ever worked for this company? Yes  No  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? Yes  No

If yes, explain: \_\_\_\_\_

**Education**

High School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City ST Zip Code

Did you graduate? Yes  No

College: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City ST Zip Code

Did you graduate? Yes  No  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO  
  Degree: \_\_\_\_\_

## References

*Please list three professional references.*

1. Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

2. Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

3. Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

## Employment

1. Current Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

YES NO

May we contact your previous supervisor for a reference?

2. Previous Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

YES NO

May we contact your previous supervisor for a reference?

3. Previous Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

YES NO

May we contact your previous supervisor for a reference?

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

## Disclaimer and Signature

*I certify that the information provided in this application is accurate and complete. I give my permission to the Early Learning Coalition of Manatee County, Inc. to verify and investigate any and all information provided in this application. I also authorize my current and former employers, educational institutions, references, and any other persons and entities referred to in this application to disclose and provide the Early Learning Coalition of Manatee County, Inc. for employment-related purposes. I also give my consent to educational institutions that I have attended to disclose and provide Early Learning Coalition of Manatee County, Inc. for employment-related purposes, transcripts, containing information about me such as my courses of study, grades, credits, rank, and degrees conferred. I understand and agree that if I have provided any inaccurate, misleading, or incomplete information in this application or during the application process, such as during interviews, my application for employment will be rejected and, if I am hired, my employment will be terminated.*

*I understand and agree that this application does not contain or imply any promise that I will be hired by the Early Learning Coalition of Manatee County, Inc., and that if I'm hired, it does not contain or imply any promise that I will be employed by the Early Learning Coalition of Manatee County, Inc. for any period of time or duration. I also understand and agree that, if I am hired, nothing in this application requires the Early Learning Coalition of Manatee County, Inc. to have any cause or reason to terminate my employment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_