Job Application Form

Date of Application	Position		En	nploymen	t Type	9			
				Full-Time	☐ Pa	rt-Time	Des	ired Pay	
Personal Information	on								
Full Name					Social Security #				
Address									
Phone		Email				DoB			
Driving License	☐ No	Y] Yes				ears of work		
Marital Status	Single	M	arried, numb	per of depe	ndent(s)			
Educational Backgr	round								
Degree / Course	Univer	stitute	Year of Graduate G		Gra	de	City		
Employment Histor	y *Use I	oack of	f form if mo	re room is	need	ed*			
Company		Position		1	Year		Reason for Leaving		
Skills & Training	*Use back	of form	if more ro	om is need	ded*				
Skill & Training Achievement(s)		s)	Level		Year		Institute		

Attach your resume and portfolio to this job application form. Send it via email or apply in person at 116 Prince Royal Dr. Berea, KY 40403

Personal References (I	non rel	ated)
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Name	Phone Nu	ımber	Adress			
ours of Availabili	ty					
Monday	Tuesday	Wednesday	Thursday		Friday	
4:	<u> </u>	<u> </u>				
uestionaire			0.15			
ave you lived in and hat states?	other state other than h	Centucky in the last 5 y	ears? If so,	Yes _	No 🗌	
hat age group of c	hildren do you prefer v	vorking with the most?				
e you currently cer	rtified in infant/child CP	R? Expiration Date?				
are you currently co	ertified in infant/child fir	st aid? Expiration Date	e?			
hat age group of c	hildren do you prefer v	vorking with the most?				
ensportation *If	interested in transps	ortation position place	nee anewer th	ne follow	ing guestion	
	interested in transps	ortation position piec	ase answer th	ie ioliow	ing question	
Are you 25 years of	fage or older?					
lave you had any k	kind of traffic violations	over the last 12 month	ıs?			
Have you ever been involved in a car accident? If so, was it your fault?					No	