

# SonLight Preschool

116 Commonwealth Ave.  
Erlanger, KY 41018  
Phone: 859-342-2301  
Fax 859-342-2302



## Preschool Staff Application

### INSTRUCTIONS:

Print clearly and answer all questions. Initial each page. Sign and date the last page. Applications are kept on file for one year.

### PERSONAL INFORMATION:

Full Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birthdate \_\_\_\_\_

Email address: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Director \_\_\_\_\_ Teacher \_\_\_\_\_ Assistant Teacher \_\_\_\_\_ Other

\_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Substitute \_\_\_\_\_ Other

Available start date: \_\_\_\_\_

Hours Available: \_\_\_\_\_ 7:15- 9:15 \_\_\_\_\_ 9:00- 1:30 or 2:00 \_\_\_\_\_ 1:00- 4:30

Are you a Christian? \_\_\_\_\_ Yes \_\_\_\_\_ No Are you active in your church? \_\_\_\_\_ Yes \_\_\_\_\_ No

What church do you attend? \_\_\_\_\_

How are you involved/ active in your church? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been charged or convicted of a crime against a child? \_\_\_\_\_ Yes \_\_\_\_\_ No

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

\_\_\_\_\_

Have you been convicted of or pleaded no contest to a felony within the last five years?

\_\_\_\_ Yes \_\_\_\_ No If yes, please explain: \_\_\_\_\_

**Optional Information:**

Marital Status \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Children's Names and Ages \_\_\_\_\_

If you are hired, will any of your children attend SonLight Preschool? \_\_\_\_\_ If so, how many?  
 \_\_\_\_\_ What are their ages? \_\_\_\_\_

**EDUCATION:**

School	Name & Location of School	Dates Attended	# of Years	Graduation Date	Degree/ Diploma
Graduate School					
College					
High School					
Early Education Classes					

Do you have a current child first aid/ CPR certification? \_\_\_\_ Yes \_\_\_\_ No

If hired, you will need to provide copies of birth certificate, social security card, all diplomas, any certificates or first aid/ CPR cards you have. We will also need to see your driver's license, passport or social security card. You will also need to provide current and valid results of a TB test.

Do you have any experience with \_\_\_\_ Infants \_\_\_\_ 1 year olds \_\_\_\_ 2 year olds  
 \_\_\_\_ 3 year olds \_\_\_\_ 4 year olds \_\_\_\_ 5 year olds

If you have checked any, please describe your experience with that age.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Preschool

**EXPERIENCE:**

1	Employer Name	Telephone	Employment Dates		
	Address		From	To	
	Name of Supervisor		Pay	Start	Last
	Reason for Leaving				
	Email address				
	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain.				
	State job title and describe your work				

2	Employer Name	Telephone	Employment Dates		
	Address		From	To	
	Name of Supervisor		Pay	Start	Last
	Reason for Leaving				
	Email address				
	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain.				
	State job title and describe your work				

Volunteer Experience: List any volunteer work you have done with children.

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Special Talents: List any talents or skills in art, music, drama, sewing, etc.

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Is there anything else you would like to share with us?

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**REFERENCES:**

List no relatives (one reference must be a church contact)

1	Name	Telephone
	Address	
	Email address	
	What is your connection to this person?	

2	Name	Telephone
	Address	
	Email address	
	What is your connection to this person?	

3	Name	Telephone
	Address	
	Email address	
	What is your connection to this person?	

I verify that the information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information contained herein.

I hereby give my permission for Erlanger Baptist Church and SonLight Preschool to obtain information relating to my criminal history record. I understand that this information will be used in part, to determine my eligibility for a position with this organization. I understand as long as I remain an employee here, the criminal history records check may be repeated at any time.

I sign this release as my own free act. This is a legally binding agreement, which I have read and understand.

Print Name \_\_\_\_\_

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

