



Sprouts Childcare & Learning Center, LLC  
 Infant-Toddler-Preschool-After School  
 4411 N. 61 St. Omaha, NE 68104  
 (402)991-3937

Office Use Only  
 Hired: \_\_\_\_\_ Pin: \_\_\_\_\_

## Employment Application

Position: \_\_\_\_\_ Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

SSN: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

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

Looking For (check all that apply):  Full time  Part time  Temporary  On Call

### Availability:

Monday, From \_\_\_\_\_ to \_\_\_\_\_

Tuesday, From \_\_\_\_\_ to \_\_\_\_\_

Wednesday, From \_\_\_\_\_ to \_\_\_\_\_

Thursday, From \_\_\_\_\_ to \_\_\_\_\_

Friday, From \_\_\_\_\_ to \_\_\_\_\_

Saturday, From \_\_\_\_\_ to \_\_\_\_\_

Valid Driver's License?  Yes  No Driver's License #: \_\_\_\_\_

18 years of age or older?  Yes  No

Date of Birth: \_\_\_\_\_

I am a citizen and can lawfully work in the United States:  Yes  No

Have you ever been convicted of a felony?  Yes  No Date: \_\_\_\_\_

Nature of Offense: \_\_\_\_\_

Ever served in the armed forces?:  Yes  No If yes, list discharge date: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Telephone: \_\_\_\_\_

College: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Telephone: \_\_\_\_\_

Level Completed: \_\_\_\_\_

Please list any special skills, qualifications, volunteer work, etc that is related to child care and that you wish to be considered when your application is reviewed:

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**Previous Work Experience (please list last three employers):**

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Employment Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Employment Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Employment Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

**References (list three)**

Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone#: \_\_\_\_\_  
Address: Relation to You: \_\_\_\_\_

All information on this application is true to the best of my knowledge.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_