
LAST NAME

FIRST NAME

MIDDLE NAME

POSITION (S) APPLYING FOR

DATE

APPLICATION FOR EMPLOYMENT

IN ORDER THAT YOUR APPLICATION MAY BE PROPERLY EVALUATED, IT IS ESSENTIAL THAT ALL OF THE FOLLOWING QUESTIONS BE ANSWERED CAREFULLY AND COMPLETELY.

PLANET KIDS COMPLIES WITH EQUAL EMPLOYMENT OPPORTUNITY LAWS WHICH ASSURE YOU CONSIDERATION FOR POSITIONS FOR WHICH YOU QUALIFY WITHOUT REGARD TO RACE, CREED, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, SEX, AGE, MARITAL STATUS OR THE PRESENCE OF A NON-JOB RELATED MEDICAL CONDITION OR HANDICAP.



PLANET KIDS CHILDREN'S CENTER IS A QUALITY, FAMILY-FRIENDLY CHILDHOOD CENTER FOUNDED BY PARENTS, FOR PARENTS. OUR MISSION IS TO ENHANCE EACH CHILD'S INDIVIDUAL, SOCIAL, EMOTIONAL, PHYSICAL AND INTELLECTUAL DEVELOPMENT AND EASE PARENTS' CONCERNS REGARDING THEIR CHILDREN'S CARE. THE GROWING ACCEPTANCE OF OUR CENTER REFLECTS OUR EARNED REPUTATION OF QUALITY. OUR REPUTATION, IN TURN, DEPENDS ENTIRELY UPON OUR MOST IMPORTANT ASSETS--- THE TALENT, MOTIVATION AND DEDICATION OF EACH PLANET KIDS EMPLOYEE.

PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE NAME	ARE YOU KNOWN TO SCHOOLS/REFERENCES BY ANOTHER NAME? IF YES, BY WHAT NAME?		
STREET ADDRESS		CITY	STATE	ZIP CODE	HOME PHONE
HOW DID YOU COME IN CONTACT WITH PLANET KIDS _____ADVERTISEMENT _____FRIEND _____RELATIVE _____EMPL. AGENCY OTHER_____				OTHER PHONE NUMBER WHERE YOU MAY BE CONTACTED	
CITIZEN OF THE UNITED STATE		IF NO, DO YOU HAVE AN ALIEN REGISTRATION CARD			
DATE OF BIRTH	PLANET KIDS COMPLIES WITH STATE AND FEDERAL LAWS WHICH PROHIBIT DISCRIMINATION BASED ON AGE				
LIST ANY INTERESTS OR ACTIVITIES OUTSIDE OF WORK WHICH MIGHT RELATE TO THE POSITION (S) YOU ARE APPLYING FOR					
LIST MEMBERSHIPS IN PROFESSIONAL, TRADE, AND HONORARY SOCIETIES					

EDUCATION

	NAME OF SCHOOL	DATES ATTENDED FROM TO	DEGREE	MAJOR SUBJECTS	YOUR GRADE AVERAGE	HIGHEST GRADE POSSIBLE	CLASS RANK PERCENTILE
HIGH SCHOOL							
JUNIOR COLLEGE							
UNIVERSITY							
POST GRADUATE							
MILITARY, TRADE, VOCATIONAL OR SPECIAL SCHOOLING							
LIST HIGH SCHOOL HONORS, AND EXTRA CURRICULAR ACTIVITIES							
LIST COLLEGE HONORS, SCHOLARSHIPS AND EXTRA CURRICULAR ACTIVITIES							
LIST SPECIAL OFFICE SKILLS POSSESSED AND EQUIPMENT TRAINED ON				WHAT ADDITIONAL LANGUAGES DO YOU SPEAK, READ AND/OR WRITE			
_____				_____			
_____				_____			

WORK PREFERENCE

FOR WHAT POSITION (S) ARE YOU APPLYING	ARE YOU EMPLOYED NOW	SALARY DESIRED
ARE YOU APPLYING FOR	_____FULL TIME _____PART TIME _____TEMPORARY	
DATE AVAILABLE TO START WORK	HAVE YOU EVER WORKED FOR PLANET KIDS BEFORE, WHEN	WHAT SHIFT WOULD YOU PREFER _____MORN _____AFTER
DO ANY OF YOUR RELATIVES WORK FOR PLANET KIDS? NAME & RELATIONSHIP	ARE YOU WILLING TO WORK OTHER SHIFTS, IF YES, WHEN	

EMPLOYMENT HISTORY

(PLEASE START WITH YOU PRESENT OR MOST RECENT POSITION)

NAME OF EMPLOYER		ADDRESS (CITY AND STATE)		AREA CODE/TELEPHONE	
DATE STARTED WORK	STARTING SALARY/WAGE \$ PER WK/MO	STARTING POSITION	MAY WE CALL YOU AT THIS NUMBER ____ YES ____ NO		
DATE STOPPED WORK	PRESENT SALARY/WAGE \$ PER WK/MO	PRESENT POSITION	MAY WE CONTACT YOUR PRESENT EMPLOYER PRIOR TO EMPLOYMENT ____ YES ____ NO		
NAME AND TITLE OF SUPERVISOR		REASON FOR LEAVING OR DESIRING TO LEAVE			
BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES:					
NAME OF EMPLOYER		ADDRESS (CITY AND STATE)		AREA CODE/TELEPHONE	
DATE STARTED WORK	STARTING SALARY/WAGE \$ PER WK/MO	STARTING POSITION	MAY WE CALL YOU AT THIS NUMBER ____ YES ____ NO		
DATE STOPPED WORK	PRESENT SALARY/WAGE \$ PER WK/MO	PRESENT POSITION	MAY WE CONTACT YOUR PRESENT EMPLOYER PRIOR TO EMPLOYMENT ____ YES ____ NO		
NAME AND TITLE OF SUPERVISOR		REASON FOR LEAVING OR DESIRING TO LEAVE			
BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES					
NAME OF EMPLOYER		ADDRESS (CITY AND STATE)		AREA CODE/TELEPHONE	
DATE STARTED WORK	STARTING SALARY/WAGE \$ PER WK/MO	STARTING POSITION	MAY WE CALL YOU AT THIS NUMBER ____ YES ____ NO		
DATE STOPPED WORK	PRESENT SALARY/WAGE \$ PER WK/MO	PRESENT POSITION	MAY WE CONTACT YOUR PRESENT EMPLOYER PRIOR TO EMPLOYMENT ____ YES ____ NO		
NAME AND TITLE OF SUPERVISOR		REASON FOR LEAVING OR DESIRING TO LEAVE			
BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES					

MEDICAL HISTORY

DO YOU HAVE A DISABILITY, A HANDICAP OR MEDICAL CONDITION WHICH MAY IN SOME WAY TEND TO LIMIT YOUR COPABILITIES IN THE POSTTION (S) FOR WHICH YOU ARE APPLYING.

_____ YES

_____ NO

IF YES, PLEASE EXPLAIN:

AGREEMENT

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE PLANET KIDS, INC. TO MAKE ANY INVESTIGATIONS AND INQUIRIES OF MY PERSONAL EMPLOYMENT, MEDICAL HISTORY OR OTHER RELATED MATTERS AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I HEREBY RELEASE EMPLOYERS, SCHOOLS OR PERSONS FROM ALL LIABILITY IN RESPONDING TO INQUIRES IN CONNECTION WITH MY APPLICATION.

I UNDERSTAND THAT ALL OFFERS OF EMPLOYMENT ARE CONDITIONAL UPON SATISFACTORY REFERENCE CHECKS AND SUCCESSFUL COMPLETION OF A PHYSICAL EXAMINATION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW (S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL POLICIES AND REGULATIONS OF THE COMPANY.

DATE _____

SIGNATURE _____