



## Employment Application

Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you 18 or older? Yes \_\_\_No\_\_\_ Position Applying For: \_\_\_\_\_

### Education

Name of High School: \_\_\_\_\_ Did you graduate? Yes\_\_\_No\_\_\_

Highest grade completed \_\_\_\_\_

Name of College: \_\_\_\_\_ Degree: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Major Field of Study: \_\_\_\_\_

Technical or Vocational: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Major Field of Study \_\_\_\_\_

Other Training: \_\_\_\_\_

\_\_\_\_\_

Professional Licenses or Memberships: \_\_\_\_\_

Are you willing to participate in continuing education and training for this position? \_\_\_\_\_

## Employment History

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

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

Dates of Employment: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

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

Dates of Employment: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

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

Dates of Employment: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

## Additional Experience

Describe any other relevant experience, training, or skills you have. Include volunteer work. Give details, locations, supervisors, etc.

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## References

List at least three persons, including two unrelated to you, who can comment on your character and your ability to work with children.

Name	Address (street, city, state, zip)	Phone Number
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May we contact your present employer? Yes\_\_\_No\_\_\_

## Personal History

Have you been previously licensed to care for children? Yes\_\_\_No\_\_\_

Explanation: \_\_\_\_\_

Have you ever had a license to care for children revoked or denied in Alaska or any other state?

Yes\_\_\_No\_\_\_

Explanation: \_\_\_\_\_

Have you ever been investigated for child abuse or neglect? Yes\_\_\_No\_\_\_

Explanation: \_\_\_\_\_

Do you have a physical, health, mental health, or behavioral problem that might pose a risk to the health, safety, or well-being of children? Yes\_\_\_No\_\_\_

Explanation:\_\_\_\_\_

Have you been involved in a domestic violence incident within the last 10 years or do you have an alcohol or substance abuse problem that might pose a risk to the health, safety, or well-being of children? Yes\_\_\_No\_\_\_

Explanation:\_\_\_\_\_

Have you been convicted of a crime or charged with a criminal offense in the last 10 years? Yes\_\_\_No\_\_\_

Explanation:\_\_\_\_\_

Have you ever been convicted of or charged with a sex crime? Yes\_\_\_No\_\_\_

Explanation:\_\_\_\_\_

I certify that the contents of this form and the information provided with it are true, accurate, and complete. I authorize that employer to contact persons listed as references and I understand that the employer may contact others to verify information contained here. I understand that all employment is dependent on State and Federal background checks.

\_\_\_\_\_

\_\_\_\_\_

Signature

Date

Please submit completed application in person (709 W.9th Street Suite #131) or, via email  
[goldcreekcdc@gmail.com](mailto:goldcreekcdc@gmail.com)