

Sonshine World Daycare 2715 W 39th Kearney NE 68845 308-234-1883 office@sonshineworld.com

Staff Application

	Last First		Middle	•	Maiden	
Current Add	dress:					
	Street		City	State	Zip Co	ode
		Cell phone provide	r:	Male	Female	Age:
Social Secu	ırity #:		Date of Birth:			
Best time to	o contact you at ho	ome is:	: a.m.	or p.m.	(circle one)	
Date availab	ole for work:		What is your	desired hourly	range?	
Hours you a	are available to wo	ork: (Sonshine Wor	Id's hours are from 6 WEDNESDAY	:20 a.m. to 6:0 THURSDA		RIDAY
(am)						
(4111)						

EDUCATIONAL BACKGROUND:

School	Name and Address of School	Course of Study	No. of Years Completed	Diploma / Degree
High School				
Undergrad. College				
Graduate / Professional				
Other (specify)				

WORK BACKGROUND AND EXPERIENCE:

(Please include all employers for the last five years.)

Employer	Dates	Employed		Work Performed	
Address	From	То			
Telephone No.(s)					
Totophono No.(c)					
Position	Hourly Rate	or Salary			
	Starting	Final			
Supervisor					
•					
Reason for leaving		May we	Yes	No	
		contact			
Employer	Dates	Employed		Work Performed	
Address	From	То			
Telephone No.(s)					
Total transcription					
Position	Hourly Rate	or Salary			
	Starting	Final			
Supervisor					
Reason for leaving		May we	Yes	No	
		contact			
Employer	Dates	Employed		Work Performed	
				Work Performed	
Employer Address	Dates From	Employed To		Work Performed	
Address				Work Performed	
				Work Performed	
Address	From Hourly Rate	To or Salary		Work Performed	
Address Telephone No.(s)	From	То		Work Performed	
Address Telephone No.(s)	From Hourly Rate	To or Salary		Work Performed	
Address Telephone No.(s) Position	From Hourly Rate	To or Salary		Work Performed	
Address Telephone No.(s) Position	From Hourly Rate	To or Salary Final May we	Yes	Work Performed	
Address Telephone No.(s) Position Supervisor	From Hourly Rate	To or Salary Final	Yes		
Address Telephone No.(s) Position Supervisor	From Hourly Rate	To or Salary Final May we	Yes		
Address Telephone No.(s) Position Supervisor Reason for leaving Employer	From Hourly Rate Starting Dates	or Salary Final May we contact Employed	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving	From Hourly Rate Starting	or Salary Final May we contact	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address	From Hourly Rate Starting Dates	or Salary Final May we contact Employed	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer	From Hourly Rate Starting Dates	or Salary Final May we contact Employed	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address	From Hourly Rate Starting Dates From Hourly Rate	or Salary Final May we contact Employed To or Salary	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address Telephone No.(s)	From Hourly Rate Starting Dates From	or Salary Final May we contact Employed	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address Telephone No.(s)	From Hourly Rate Starting Dates From Hourly Rate	or Salary Final May we contact Employed To or Salary	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address Telephone No.(s) Position Supervisor	From Hourly Rate Starting Dates From Hourly Rate	or Salary Final May we contact Employed To or Salary Final	Yes	No	
Address Telephone No.(s) Position Supervisor Reason for leaving Employer Address Telephone No.(s) Position	From Hourly Rate Starting Dates From Hourly Rate	or Salary Final May we contact Employed To or Salary	Yes	No	

PERSONAL / PROFESSIONAL REFERENCES:

Please <u>do not</u> include family members	Name	Phone Number	E-mail	Occupation
A Spiritual leader				
A non-related person who has known you more than 3 years				

lease list any a	dditional specializ	ed training, qual	lifications or	ioh-related s	kills:		
lease list ally at	iditional Specializ	sa training, quai	inications, or	Job-related 3	KIII3.		
escribe any oth irl/Boy Scouts,	er experience you etc.)	have had worki	ing with child	ren (ie. Sunda	ay School, Va	acation Bible	Scho
<u> </u>	,						
hat age group	would you most li	ce to work with?	?				
riefly state wha	t you feel a pre-sc	hool child's grea	atest needs a	re:			

Signature Date	
In the event of employment, I understand that I am required to abide by all policies and procedures of Sonshine World, and the rules and regulations of the State of Nebraska Department of Health and Huma Services.	an
What do you consider to be the distinctive characteristics of a Christian daycare or school?	
What is your vision of quality child care?	
What is your philosophy of discipline?	
Describe what you believe would be a typical pre-school day schedule:	