



sonshineworld daycare

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

Staff Application

Full Name: _____
 Last First Middle Maiden

Current Address: _____
 Street City State Zip Code

Cell Phone: _____ Cell phone provider: _____ Male _____ Female _____ Age: _____
 e-mail _____

Social Security #: _____ Date of Birth: _____

Best time to contact you at home is: _____:_____ a.m. or p.m. (circle one)

Date available for work: ____/____/____ What is your desired hourly range? _____

Hours you are available to work: (Sonshine World's hours are from 6:20 a.m. to 6:00 p.m.)

| | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|------|--------|---------|-----------|----------|--------|
| (am) | | | | | |
| (pm) | | | | | |

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 | To | |
| Telephone No.(s) | | | |
| Position | <u>Hourly Rate</u> Starting | <u>or Salary</u> Final | |
| Supervisor | | | |
| Reason for leaving | | May we contact | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | | | |
|---------------------------|--------------------------------|---------------------------|--|
| Employer | Dates Employed | | Work Performed |
| Address | From | To | |
| Telephone No.(s) | | | |
| Position | <u>Hourly Rate</u> Starting | <u>or Salary</u> Final | |
| Supervisor | | | |
| Reason for leaving | | May we contact | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | | | |
|---------------------------|--------------------------------|---------------------------|--|
| Employer | Dates Employed | | Work Performed |
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| Telephone No.(s) | | | |
| Position | <u>Hourly Rate</u> Starting | <u>or Salary</u> Final | |
| Supervisor | | | |
| Reason for leaving | | May we contact | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | | | |
|---------------------------|--------------------------------|---------------------------|--|
| Employer | Dates Employed | | Work Performed |
| Address | From | To | |
| Telephone No.(s) | | | |
| Position | <u>Hourly Rate</u> Starting | <u>or Salary</u> Final | |
| Supervisor | | | |
| Reason for leaving | | May we contact | <input type="checkbox"/> Yes <input type="checkbox"/> 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 | | | | |

Please list any additional specialized training, qualifications, or job-related skills:

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Describe any other experience you have had working with children (ie. Sunday School, Vacation Bible School, Girl/Boy Scouts, etc.)

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What age group would you most like to work with?

Briefly state what you feel a pre-school child's greatest needs are:
