## **Brentwood UMC**



## **Nursery Worker Application**

Note: If you have a prepared resume, please include it with your application.

		Р	erson	al Profile					
Full Name:						Date:			
	Last	First			M.I.				
Address:	ddress: Street Address						Apartment/Unit #		
	Oneel Muliess						<i>,</i>		
	City				State		ZIP Code		
Cell Phone:				Email:					
		Emple	vmen	nt Information			_		
		LIIIpid	ушеп	it iiiioiiiiatioii					
Date Availab	ole: Are you	at leas	t 16 yea	ars of age?	Bi	rth date:	<u>:</u>		
Are you a current or former member of Brentwood UMC, Trinity Church, or The Village Church?								_	
Have you be	een previously employed by Brei	ntwood	UMC, T	rinity Church, or The	e Village Ch	urch?	YES	NO 🗆	
-	ted to an employee of Brentwooes, please list the name of the re		-		-		YES	NO	
Are you a cit	izen of the United States?	YES	NO	If no, are you auth	norized to w	ork in th	YES e U.S.?	NO	
Have you ev	er been convicted of a felony?	YES	NO						
If yes, explai	n:								
		lr	nteres	t & Skills					
List any talents/skills you have that will assist you in working with children?									

		Educ	ation			
High School:		City/State:				
From:	To:	Did you graduate?	YES	NO	If no, what year will you graduate?	
College:		City/State:				
From:	To:	Did you graduate?	YES	NO	Degree:	
Other:		City/State:				
From:	To:	Did you graduate?	YES	NO	Degree:	
Describe any spec	cial training you have	had: (CPR training, S	afe Sar	nctuary t	raining, babysitting certification, etc.)	
		Refere	ences			
Please list two or	three personal refe	rences.				
Full Name:	ull Name: Email:					
Relationship: Phone:						
Full Name:					Cmoil.	
Relationship.					Phone:	
Full Name:					Email:	
Relationship:					Phone:	
		Childcare Experi			r Volunteer)	
elementary children.	erience (not listed in em <sub>l</sub> For Name list individual's	ployment section above) i	n which y ie, and/or	ou were ir event nar	nvolved in working with infants, preschool and/or me. If it is a volunteer position, write "volunteer" in	
Name #1:					Email:	
Job Title:		Starting Sa	alary: <u>\$</u>		Ending Salary:	
Responsibilities:						
From:	To:		Reaso	n for Lea	aving:	
May we contact th	is supervisor for a re	ference?	YES	N C		

Name # 2:				Email:
Supervisor:				Phone:
Job Title:	Starting Salary:			Ending Salary:
Responsibilities:				
From:	To:	_ Reason fo	or Leaving:_	
May we contact	this supervisor for a reference?	YES 🗆	NO 🗆	
Name #3:				Email:
				Phone:
Job Title:	Starting Salary:			Ending Salary:
Responsibilities:				
From:	To:	_ Reason fo	or Leaving:_	
May we contact	this previous supervisor for a reference?	YES 🗆	NO	
	Other Current or			
leave this section b				
				Email:
Supervisor:				Phone:
Job Title:	Starting Salary:			Ending Salary:
Rasnonsihilitias:				
responsibilities.				
	To:	_ Reason fo	or Leaving:_	

Company 2:				Email:		
Company 2:Supervisor:				Email: Phone:_		
Job Title:	Start	ing Salary: <u>\$</u>		Ending Salary:		
Responsibilities:						
From: To:		Reason for Leaving:				
May we contact this supervisor for	a reference?	YES	NO			
		er and Signat				
	oyer to contact, obtain onal institutions, and r athering, and using s	n, and verify the a references. I also	accuracy of in hereby rele	information contained in this application ease from liability the potential employe oloyment decisions and all other		
I understand that any misrepresentati cancellation of this application or imm						
	nent. Accordingly, ei	ither I or the empl	oyer can ter	at this application does not constitute minate the relationship at will, with or law.		
I understand that it is the policy of this with a disability because of that person				scriminate against a qualified individual uired by the ADA.		
				of identify and legal work authorization that the same identifies the same of the same identifies the same of the same identifies the same of the same identifies the		
Further, I understand that if I am emp background check process or failure	loyed, I will be requir of the background ch	red to complete a neck process shall	background I result in im	I check. Failure to complete the imediate termination of employment.		
I represent and warrant that I have re conditions.	ad and fully understa	and the foregoing,	and that I s	eek employment under these		
Signature:				Date:		