

# APPLICANT REVIEW SHEET

APPLICANT NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

INTERVIEW DATE: \_\_\_\_\_

INTERVIEW WITH: \_\_\_\_\_

## APPLICANT PLEASE CIRCLE THE FOLLOWING

APPLICANT CAN PROVIDE THE FOLLOWING BEFORE START DATE:

YES NO DRIVERS LICENSE

YES NO SOCIAL SECURITY CARD OR EQUIVALENT OF BOTH

YES NO HIGH SCHOOL DIPLOMA/ GED/ COLLEGE DIPLOMA OR  
TRANSCRIPTS

\*\*\*If Applicant does not meet the above requirements then the Interview  
must STOP until these items can be obtained\*\*\*

YES NO AVAILABLE MONDAY-FRIDAY 6:30 AM TO 6:30 PM

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## FOR OFFICE USE ONLY:

What classroom do they have the most experience in? \_\_\_\_\_

What classroom do we think they would fit best? \_\_\_\_\_

What day did we run background check? \_\_\_\_\_

ROP \_\_\_\_\_

Schedule conflicts \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Country Acres CDC

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# EMPLOYMENT APPLICATION

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“For those that care enough for the finest”



Country Acres CDC does not discriminate against qualified individuals with disabilities in job applicants, procedures, hiring, termination, advancement benefits, job trainings, and other terms conditions and privileges of employment. A qualified applicant with a disability is an individual that meets skills, experience, education and other job related requirements of the position applied for, and with or without reasonable accommodation, can perform all essential functions of that position.

Country Acres CDC believes in equal opportunity employment for all individuals without regards to race, color, religion, sex, age, national origin, veteran, or disability status. This policy extends to all terms, conditions, and privileges of employment including but not limited to application, hiring, upgrading transfer, layoff, termination, rate of pay, job assignment, job classification, training and any other term condition, or privilege of employment.

**THIS IS TO INFORM YOU THAT AS PART OF OUR PROCEDURES FOR PROCESSING APPLICANTS, AND INVESTIGATIVE REPORT MAY BE MADE WHEREBY INFORMATION IS OBTAINED THROUGH A PERSONAL INTERVIEW WITH YOU, PREVIOUS EMPLOYERS, CURRENT EMPLOYERS(WITH PERMISSION), PERSONAL, PROFESSIONAL REFERENCES AND SOCIAL MEDIA.**

# Country Acres CDC

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address City State Zip*

**Hours of Interest**.....Hours and age group assigned are not guaranteed on a day to day basis. The needs of the school and children within are our priority. Employee should remain flexible with schedule and age for whom they are responsible \_\_\_\_\_ (HOURS AND DAYS)

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary:\$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Driver's License# and State \_\_\_\_\_

Applicants understands and agrees that they will be under constant video surveillance which may be shared with others. YES NO If no, are you authorized to work in the U.S.? YES NO  
Are you over the age of 18? Y N 25? Y N

Our children go outside twice a day, weather permitting. Are you capable of going outside with the children and supervise while interacting with the children? YES NO

Have you ever worked for this company? YES NO Type of Employment Seeking Full Time  Part Time

Have you ever been convicted of ANY of the charges listed on the page attached? YES NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

### References PROFESSIONAL ONLY

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

**Previous Employment (start with most recent)**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Medical**

I have been provided a job description and am able to perform all job functions without limitations. Applicants should be able to lift up to 40 pounds numerous times throughout the day. Your primary responsibility is the health and safety of the children. **Yes or No.** If answer is no, please explain.

\_\_\_\_\_.

Our staff is required to have proof of this **on their first day of employment.**

Minimum of H.S. Diploma, College Diploma, or College transcripts or GED (circle one).

Original copy of current CPR/First Aid (original must be kept in employee file for 90 days after employment) YES NO. We can assist in setting up a class for CPR/First Aid/ SIDS and Shaken Baby

Our program requires one to keep the children safe. You will be required to keep the classroom at tidy as possible. Are you capable of picking up items and placing them back where they belong, do light cleaning duties throughout the day? YES NO

Employee will be required to retain pertinent information of each child, and the policies and procedures of the program? Are you capable in fulfilling this requirement? YES NO

Employee will be required to communicate clearly with others verbally, in writing and electronically through a social application. This will include communication noting children's activities, diapering, feeding etc. Are you capable in fulfilling this requirement? YES NO

All employees must be able to change diapers while following correct diapering procedures. Are you capable in fulfilling this requirement? YES NO

Employees are required to attend Professional Development Days as well as bring that knowledge back and use it in the classroom. Are you capable in fulfilling this requirement? YES NO

Your employment is contingent on the completion of employee paperwork by completing and providing all necessary signatures and required certifications. Does the applicant understand this requirement? YES NO

The undersigned applicant agrees that any employment entered into with him/her by our Center shall be for an indefinite term as we are an at-will employer, and said applicant agrees to abide by all terms of our Center's policies and procedures and personnel policies and the Texas Department of Protective and Regulatory Services requirements, and any other rules established by our center.

In addition, you will be required to provide a Texas State Notarized Affidavit with regards to sexual and physical abuse of a minor. A criminal background check including FBI fingerprints will be required as well. The information provided in this application will assist in running these checks.

I hereby affirm that all facts and statements set forth by me on this application for employment are hereby complete and true to the best of my knowledge and belief. I also certify that I have not knowingly withheld any facts or information which if disclosed would unfavorably affect my application. I understand that falsifying or misleading information may be cause for refusal of employment and grounds for dismissal. 9.28.18

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SIGNED

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DATE

**AUTHORIZATION FOR PRIOR EMPLOYER TO RELEASE INFORMATION**

(Please read the following statements, sign below, and return to the Human Resources office.)

I, \_\_\_\_\_, hereby authorize any investigator or duly accredited representative of COUNTRY ACRES CDC bearing this release to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, arrest, and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by COUNTRY ACRES CDC and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

I hereby release any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance, or any attempts to comply, with this authorization.

\_\_\_\_\_

(Applicant's signature)

\_\_\_\_\_

(Date)

