



PRECIOUS MEMORIES PLACE

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Mystic, CT 06355

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A balance of health and knowledge

A Preschool and Lifestyle Center

EMPLOYMENT APPLICATION

Thank you for your interest in and application for employment with Precious Memories Place. We are an equal opportunity employer and give employment and promotional consideration without regard to race, color, sex, religion, age, disability, disabled veterans, or veterans of the Vietnam era. We seek applications for employment who are dedicated, hardworking and seeking employment. In return Precious Memories Place offers competitive income, an excellent working environment and the opportunity to grow with the company.

GENERAL INFORMATION

Last Name:

First Name:

Middle Initial:

Email:

Address: (Street, P.O. Box, Apt. #)

City, Town:

State:

Zip:

Cell Phone:

Home Phone:

Are you eligible to work in the US.

Have you ever been convicted of a misdemeanor or felony crime? ___Yes ___No

EMPLOYMENT DESIRED

Position for which application is being made: (Be specific)

I am available to work: (Check all applicable)

___ Full Time ___ Part Time ___ Temporary

Days Available: (Circle) M T W Th F

Unavailable Times:

Date Available:

Expected Compensation:

Are you at least 18 years old?

EDUCATION: (High School, College, Etc.)

Higher Education School Name:

Year Completed:

Major Field of Study:

High School Name:

Graduation Date:

EMPLOYMENT HISTORY: (List most recent first, then back.)

1. Employer Name: _____ Dates of Employment: _____ Job Title: _____

Employer Address: (Street, P.O.Box) _____ City, Town _____ State: _____ Zip Code: _____ Phone Number: _____

2. Employer Name: _____ Dates of Employment: _____ Job Title: _____

Employer Address: (Street, P.O.Box) _____ City, Town _____ State: _____ Zip Code: _____ Phone Number: _____

3. Employer Name: _____ Dates of Employment: _____ Job Title: _____

Employer Address: (Street, P.O.Box) _____ City, Town _____ State: _____ Zip Code: _____ Phone Number: _____

REFERENCES: (List Three Employment References (Persons) Not Related to you, Known For One Year Plus)

Name: _____ Address: _____ Phone: _____ Years Acquainted: _____

1. _____

2. _____

3. _____

PLEASE READ THE FOLLOWING STATEMENTS, ASK ANY QUESTIONS, AND SIGN BELOW

I certify that the above information is true and correct and give authorization for investigation of all statements and information contained in this application, my resume, other documents or verbally obtained during an employment interview. I voluntarily consent to allow Precious Memories Place or any of their representatives or agents to check my references by contacting any person, company or governmental entity they deem to be an appropriate reference. I understand the reference questions may pertain to my personal or educational background, work experience, character and behavior. I understand my employment is subject to satisfactory verification of this information and agree that deliberate falsification of this document or significant omissions shall be grounds for employment consideration disqualification or dismissal from employment, if discovered at a later date. I pledge, if hired, to comply with the guidelines of conduct and company policies and procedures of Precious Memories Place. I also realize that company policies, procedures, practices or statements made during an interview or employment do not create an employment contract by implication or otherwise. I further understand and agree that my employment is for no definite period of time and may, regardless of time and manner be terminated by the company or myself with or without cause or previous notice. I understand, that if hired, I will be an at will employee. I understand that employment may be subject to satisfactory completion of a physical examination.

This application will be kept in a current file for thirty days. If not contacted during that period of time, it may be necessary to complete another application to receive further employment consideration.

SIGNATURE _____

DATE _____