JOB APPLICATION

Willow Creek Child Care W164 N11310 Squire Drive, Germantown, Wisconsin 53022 262-255-7722

Willow Creek Child Care is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Applicant Information				
Applicant Name:				
Address:				
City, State and Zip Code:				
Telephone Number:				
Email Address:				
Date of Application:				
Employment Position Position(s) applying for:				
How did you hear about this position?				
What days are you available for work?				
On what date can you start working if you are hired?				
Salary desired:				
Personal Information				
Have you ever applied to or worked for Willow Creek Child Care before?	Yes	No		
If yes, when?				
	<u> </u>			
Do you have any friends, relatives, or acquaintances working for Willow Creek Child Care?	Yes	No		
If yes, state name & relationship:	163	140		
	<u>—</u>			
Are you 18 years of age or older?	Yes	No		

Are you a U.S. citizen or appr	oved to work in the United	States?	Yes	No
What document can you pro	vide as proof of citizenship	or legal status?		
Will you consent to a manda	Yes	No		
Have you ever been convicted of a criminal offense (felony or misdemeanor)?				No
If yes, please state the nature	e of the crime(s), when and	where convicted and o	disposition of the o	ase:
(Note: No applicant will be de The date of the offense, the description of the event, and position(s) applied for may, ho	nature of the offense, in the surrounding circumst	cluding any significan	nt details that aff	ect the
Job Skills/Qualifications Please list below the skills and	qualifications you possess	for the position for wh	iich you are applyii	ng:
(Note: Willow Creek Child Care measures that may be necesso possible that a hire may be tes conducted by a medical profes	ary for eligible applicants/el sted on skill/agility and may	mployees to perform es	ssential functions.	It is
Education and Training				
High School		Vana Cuado ata d	D	1
Name	Location (City, State)	Year Graduated	Degree Earne	<u>3</u> 0
College/University	1	1	I .	
Name	Location (City, State)	Year Graduated	Degree Earne	 ed
Vocational School/Specialized	Training			
Name	Location (City, State)	Year Graduated	Degree Earne	ed

<u>Previous Employment</u>	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Franksian Nama.	
Employer Name: Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
-	
<u>References</u>	
Please provide 2 personal and profess	sional reference(s) below:
Reference	Contact Information
<u>Additional Information:</u>	
Have you taken an Early Childhood 1	or 2 class? Infant/Toddler Class?