JOB APPLICATION

Little Dreamers 2105 FM 2935, Brenham, Texas 77833 979-421-9000

Little Dreamers 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: Child Care (full time) How did you hear about this position? What days are you available for work? What hours or shift are you available for work? If needed, are you available to work overtime? On what date can you start working if you are hired? Do you have reliable transportation to and from work? Salary desired: **Personal Information** Have you ever applied to or worked for Little Dreamers before? Yes No If yes, when? Do you have any friends, relatives, or acquaintances working for Little Dreamers Yes No If yes, state name & relationship: Are you 18 years of age or older? Yes No

Yes

No

Are you a U.S. citizen or approved to work in the United States?

		or legal status?		
Will you consent to a mandatory controlled substance test?				
Do you have any condition which would require job accommodations?				No
	commodations required below			
Have you ever been conv	icted of a criminal offense (feld	ony or misdemeanor)?	Yes	No
If yes, please state the na	ture of the crime(s), when and	where convicted and d	isposition of the c	ase:
Job Skills/Qualification Please list below the skills	<u>s</u> and qualifications you possess	s for the position for wh	ich you are applyir	ng:
	nplies with the ADA and consid	lers reasonable accomi	nodation measure	s tha
	ble applicants/employees to pe			3 1110
Education and Training				S are
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Education and Training High School Name		erform essential function	ns.)	
Education and Training High School Name		erform essential function	ns.)	ed
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Provious Employment			
<u>Previous Employment</u> 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:			4
Employer Address:			
City, State and Zip Code:			
Employer Telephone:		The same of the sa	
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 3 personal and pro	fessional referenc	e(s) below:	
Reference		Contact Information	
Additional Information:			
All other duties assigned by Direc	tor		

AT-WILL EMPLOYMENT

The relationship between you and the Little Dreamers is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Little Dreamers. No representative of Little Dreamers has authority to

enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice-President/Chief Operations Officer or the Company's President.

Applicant Signature:	Dated:	