

Anderson **AFTER SCHOOL**

Employment Application

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Social Security Number _____

Drivers License Number and State _____

Last Year of School Completed _____ Are you currently in school _____

Name and Location of School _____

Degree Completed or Presently Working On _____

Areas of Major and Minor _____

Current Place of Employment _____

Address _____

Number of Years There _____ Job Title _____

Duties and Responsibilities _____

Emergency Contact _____

Cell Phone _____ Daytime _____

REFERENCES

Name _____

Address _____

Cell Phone _____ Daytime/Work phone _____

Name _____

Address _____

Cell Phone _____ Daytime/Work phone _____

OPTIONAL INFORMATION

Date of Birth _____ Height _____ Weight _____

Marital Status _____ Maiden Name _____

Number of Children _____ Ages _____ Will they need care here? _____