

**Elizabethtown Community Nursery School (ECNS)**

**Application for Employment**

777 South Mount Joy Street

Elizabethtown, PA 17022

717-367-6772

www.etowncns.org

<b>Name</b>	
<b>Address</b>	
<b>Email Contact</b>	
<b>Telephone Number</b>	
<b>Apply for Position as</b>	

**EDUCATIONAL BACKGROUND**

	<b>School/Institution</b>	<b>Major/ Minor</b>	<b>Diplomas, Degrees or Certifications</b>
<b>High School</b>			
<b>College/University</b>			
<b>College/University</b>			
<b>Additional Education</b>			

## OTHER QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experiences

## EXPERIENCE

(Present or most recent first)

<b>Dates</b>		<b>Name of Employer and Address</b>		<b>Your Title</b>
<b>From</b>				
<b>To</b>				
		<b>(Area Code) Telephone:</b>		
<b>Work Performed:</b>				
<b>Dates</b>		<b>Name of Employer and Address</b>		<b>Your Title</b>
<b>From</b>				
<b>To</b>				
		<b>(Area Code) Telephone:</b>		
<b>Work Performed:</b>				
<b>Dates</b>		<b>Name of Employer and</b>		<b>Your Title</b>

		<b>Address</b>		
<b>From</b>				
<b>To</b>				
		<b>(Area Code) Telephone:</b>		
<b>Work Performed:</b>				

### References

Name	Position	Address	Telephone

Are you a U.S. citizen or do you have approval to work in the United States?    Yes\_\_\_ No\_\_\_

We hire only U.S. citizens and aliens lawfully authorized to work in the United States. We will require all new employees to complete the designated employer's verification forms which prove identity and employment authorization.

Employment is contingent upon satisfactory completion of a pre-employment medical exam, fulfilled clearances, and satisfactory job performance for a period of 90 days.

Employee must obtain the following clearances :

**ACT 34 Clearance (PA State Police Criminal Background Check)**

**ACT 114 (Federal Criminal History Record)**

**ACT 151 Clearance (PA Child Abuse History Clearance)**

ECNS is an Equal Opportunity Employer. As such it adheres to all the Federal, State and Local laws that prohibit discrimination because of race, gender, age, religion, ethnicity, sexual orientation, and ancestry.

I certify that I have completely and correctly supplied all the information requested on this application. I agree that any misrepresentation or omission of fact(s) on this application, or in the processing thereof

shall be cause for dismissal.

Applicant's Signature	Date
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