



NOTICE TO APPLICANTS

We are pleased that you have chosen to apply for employment at Imagination Crossing.

Imagination Crossing is an equal opportunity employer. It is the policy of Imagination Crossing to consider all applicants for employment based on their qualifications in light of job vacancies.

Imagination Crossing fully complies with all applicable laws which prohibit discrimination on the basis of race, color, religion, sex, national origin, age, and veteran or disability status.

For the safety of our current and future employees, we intend for this to be a drug-free workplace. Alcohol and/or drug testing will be a condition of employment and may be given at any time during employment.

To be sure that your application receives full consideration, you must fill it in completely and accurately. Applications are considered active for 30 days from the date they are filed. After 30 days, the applications are retired to an inactive file and held in an inactive status for a period of time required by law. If you have not been hired within 30 days of the date you file your application and you wish to be considered for positions that become available after that date, you must return to this office and fill out a new application or update your old application.

JOB APPLICANT AGREEMENT AND CERTIFICATION

"I certify that the information given by me in this application is true in all respects, and I agree that if the information is found to be false in any way, it should be considered sufficient for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, all references, and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information."

"I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Imagination Crossing and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon Imagination Crossing unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that Imagination Crossing retains the same right."

"I understand that employment policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures in whole or in part at any time."

"I understand that this application will be kept active for 30 days from the date completed, after which time I would have to re-apply in accordance with established company procedures."

"I certify that I have never been convicted of and it has never been shown by credible evidence, e.g., a court or jury, a department investigation or other reliable evidence that I have abused, neglected or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct."

"I understand that as a condition of the application process Imagination Crossing will perform a federal, state, and local criminal history and records check, and by signing this application I acknowledge my understanding of this and my consent to such checks and any updated reports.

"I understand and agree that upon request by my employer and when applicable at any time during the term of my employment, I must present evidence of a valid driver's license and by signing this application I consent to a driver's license record check with the appropriate authorities."

"I understand a confidentiality letter must be signed and kept on file at the school."

CPR and First Aid are prerequisites for employment at Imagination Crossing. You have thirty days from date of your signature to supply proof of certification.

Date: _____

Applicant Signature: _____

Administrator Signature _____

Applicant Information

Name:		Date:	
Address:			
City:		State:	Zip:
Phone #:		Cell:	
Email Address:			
Social Security #:	Driver's License #	Are you 18 yrs or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment Information

Position for which you are applying:		Desired Rate of Pay:	Date Available:
I can work: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time			Hours Available:
Do you need child care for any of your children here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list needs:			
Have you ever applied to this center before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Referral Source:
Can you provide proof of citizenship or immigration status? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you related to anyone in our employ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state name.	
Have you ever been convicted of any crimes? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe fully			

Education

SCHOOL	ADDRESS	MAJOR	NUMBER OF YEARS	DID YOU GRADUATE?
High School				
College				
Other				

Please list all courses, workshops, in-service training, certificates and any hobbies or experiences which may pertain to this position:

Employment History: Please list employment for the last 7 years, starting with the most recent. Explain any gaps between employment, i.e. stay-at-home parent, volunteer work, etc.

From	To	Employer Name, Address and Phone #	Job Title	Salary	Reason for Leaving

References: Please list names of three people not related to you, whom have known you at least one year.

Name	Address	Phone Number	Relationship	Years Known

*** The State of Ohio prohibits listing family members as references**

1. Why do you want to work with children?

2. All children are:

3. Describe a time when you handled a difficult situation in a positive manner:

4. Describe a time when you wished you had handled a situation differently.
Describe how you WOULD have handled it in a positive manner:

5. What is your teaching philosophy?
