



Employment Application

The Children's House
1840 Komo Mai Drive
Pearl City, HI 96782
PHONE (808) 455-4131
FAX (808) 455-2748
WEB SITE www.childrenshousehawaii.org

Name _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Business Phone _____ May we contact you at work for interview purposes YES NO

E-mail _____

Position Desired _____ Grade Level _____

Can you work full-time? YES NO What hours can you work? _____

Are you legally eligible to work in the United States? YES NO

Have you ever been convicted of a crime? YES NO

If yes, please explain.

Have you used a computer in the workplace? YES NO For personal use? YES NO

If so, what kind of computers/software have you used?

Would you consider yourself to be computer-literate? YES NO

Our curriculum is closely integrated with the character values as modeled by Jesus, The Good Shepherd. List any training you have in Bible, Christian education or character value education.

Do you currently hold first aid certification? ___ YES ___ NO If so, when does it expire? _____

Do you currently hold child CPR certification? ___ YES ___ NO If so, when does it expire? _____

Are you registered with the Hawaii Department of Human Services Early Childhood Registry or the former C.A.N.O.E.S. or Hawaii Careers with Young Children Registry? _____ YES _____ NO

If so, what is your classification? _____

When does your registry certification expire? _____ Registry Number? _____

Please describe any Montessori training you have received.

Please describe any other special training you have received.

EDUCATION: Include high school, vocational school and college. Verification of all levels of education is required. Official transcripts are preferred. However, copies will be acceptable.

Name of School or College	City, State	Dates Attended	Diploma or Type of Degree Received	Area of Study

Why are you interested in working at The Children’s House?

What are your career and educational goals?

List any special interests, hobbies or skills such as music, drama, art, etc.?

We highly recommend that any applicant look over our web site before applying for a position. Did you have an opportunity to review the information available on our web site? _____ YES _____ NO

EXPERIENCE: PLEASE LIST DIFFERENT POSITIONS FOR EACH EMPLOYER SEPARATELY.

1. Employer _____ Location _____

Position Held _____ Grade Level (if applicable) _____

Dates Employed _____ Name of Principal (Supervisor) _____

May we contact your Principal (supervisor) as a reference? _____ YES _____ NO

Supervisor's Phone No. _____ Supervisor's Email _____

Reason for leaving _____

2. Employer _____ Location _____

Position Held _____ Grade Level (if applicable) _____

Dates Employed _____ Name of Principal (Supervisor) _____

May we contact your Principal (supervisor) as a reference? _____ YES _____ NO

Supervisor's Phone No. _____ Supervisor's Email _____

Reason for leaving _____

3. Employer _____ Location _____

Position Held _____ Grade Level (if applicable) _____

Dates Employed _____ Name of Principal (Supervisor) _____

May we contact your Principal (supervisor) as a reference? _____ YES _____ NO

Supervisor's Phone No. _____ Supervisor's Email _____

Reason for leaving _____

4. Employer _____ Location _____
Position _____ Grade Level (if applicable) _____
Held _____
Dates _____ Name of Principal (Supervisor) _____
Employed _____
May we contact your Principal (supervisor) as a reference? _____ YES _____ NO
Supervisor's Phone _____ Supervisor's _____
No. _____ Email _____
Reason for leaving _____

5. Employer _____ Location _____
Position _____ Grade Level (if applicable) _____
Held _____
Dates _____ Name of Principal (Supervisor) _____
Employed _____
May we contact your Principal (supervisor) as a reference? _____ YES _____ NO
Supervisor's Phone _____ Supervisor's _____
No. _____ Email _____
Reason for leaving _____

REFERENCES: PLEASE LIST THREE PERSONS WHO CAN ATTEST TO YOUR PROFESSIONAL, PERSONAL, AND EMPLOYMENT QUALIFICATIONS.

1. Name of _____ Relationship to _____
Reference: _____ You: _____
Email: _____ Phone No.: _____

2. Name of _____ Relationship to _____
Reference: _____ You: _____
Email: _____ Phone No.: _____

3. Name of _____ Relationship to _____
Reference: _____ You: _____
Email: _____ Phone No.: _____

AUTHORIZATION FOR BACKGROUND INVESTIGATION AND RELEASE OF LIABILITY:

I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I release from liability and hold harmless The Children’s House, its employees, any former employers, educational institutions, and any other persons giving references or any other reasonable and necessary information incident to the employment process.

I authorize The Children’s House to verify the information I have provided in my employment application, in my oral statements and in any other documents or supplemental information I have provided to this agency for the purposes of employment. This shall include the authorization to conduct any and all personal background checks, including but not limited to, criminal history and related records, education and employment background and records, civilian and military court records and/or proceedings.

I certify that all information I have supplied to The Children’s House in my application and in any other form, oral or written, is true and accurate. I understand and agree that any misstated, misleading, incomplete, or false information is grounds for my disqualification from consideration for employment, for withdrawal of any offer of employment if an offer has been made, or for my immediate discharge if employment has already commenced, whenever, and however discovered.

I realize that any criminal history may bar employment with The Children’s House. I further understand that nothing in my application is intended to imply or create an employment relationship or contract for employment.

I understand that a copy of this document shall have the same legal significance as the original.

Signature Required: _____ Date: _____

If this application is sent directly via email, your printed name on the line above will serve as your signature.

FURTHER COMMENTS: