Precious Years Learning Center
218-963-1088
pylc1999@gmail.com

Application for Employment

Pre-Employment Questionnaire

PYLC in an equal opportunity employer

Position you are applying for: _____ Desired hourly wage: _____

Date available to work: _____

PERSONAL INFORMATION

Last Name	First Name	Middle Name	
Address	City	State	Zip code
Home Phone	Cell Phone	Email Address	
Social Security Number	Are you a U.S. Citizen? ◯ Yes ◯ No	Are you 18 yrs or older? ◯ Yes ◯ No	
Have you ever been convicted of a felony? ◯ Yes ◯ No	If selected for employment are willing to submit a pre-employment drug screening test? ◯ Yes ◯ No		

EDUCATION

School Name	Location	Years Attended	Degree Received	Major

Do you have current certification? check if yes ☐ CPR ☐ First Aid ☐ SUID & AHT

EMPLOYMENT HISTORY

Employer	City/State	Phone number	
Job Title	Pay Rate	Dates worked there	
Reason for leaving		May we contact them? ◯ Yes ◯ No	
Employer	City/State	Phone number	
Job Title	Pay Rate	Dates worked there	
Reason for leaving		May we contact them? ◯ Yes ◯ No	
Employer	City/State	Phone number	
Job Title	Pay Rate	Dates worked there	
Reason for leaving		May we contact them? ◯ Yes ◯ No	

REFERENCES- 3 People, not related to you, whom you have known at least one year

Name	Occupation	Years Acquainted	Phone number
1			
2			
3			

OBJECTIVE

Have you applied to PYLC before? ◯ Yes ◯ No	When?

Why do you want to work at Precious Years Learning Center?

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED. MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE. AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRONG AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

DATE _____SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

Interviewed by:	Date:

Notes:

Hired? ◯ Yes ◯ No	Position:	Starting hourly wage:

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.