



Application for Employment

Purpose

The Sandbox was established as an on-site childcare center for the employees of Klingspor Abrasives, Inc. Klingspor recognized the need for quality childcare for their workforce. **The Sandbox** does accept children from the community provided the demand from Klingspor families has been met.

The Sandbox is a four-star center meeting and exceeding requirements as mandated by the Division of Child Development in the North Carolina Department of Human Resources. **The Sandbox** is inspected regularly by the North Carolina Office of Child Development, Environmental Health Department (Sanitation), and routine fire inspections from our local fire department.

The Sandbox works collaboratively with several community service agencies such as the Department of Social Services, Catawba County Partnership for Children, and the local school systems. The Sandbox participates regularly with the local Catawba County Childcare Administrator's Association and the Foothills Association for Childhood Educators (FACE).

The Sandbox does not discriminate against any child and/or families because of race, color, national origin, sex, age or disability.

The Sandbox Mission

Our mission is to provide a creative, active, and stimulating environment, while providing superior care for all children and at the same time building a partnership with parents within our community.

The Sandbox Philosophy

The Sandbox works to meet the needs of those families in the community seeking quality childcare. Our purpose at **The Sandbox** is to serve others; namely, children attending our preschool, their parents, and our co-workers. The center is dedicated to providing services that support and contribute to the success and well being of families. As professionals, we understand the importance of early years. We are aware that a child's love for learning will be influenced by their experiences in the early years. With that belief, we commit ourselves to provide stimulating activities, which assist in the developmental process.

Personal Information

Please Print

Date: _____

Name _____

Social Security Number _____

Present Address _____

Phone _____

State Name and Department of any relatives, other than spouse, already employed by this company: _____

Position Applied For: _____

Date of Birth: ____ / ____ / ____ N. C. Driver's License Number _____

Have you ever been convicted of breaking a law other than a minor traffic violation? (The offense and how recent you were convicted will be evaluated in relation to the job for which you are applying.) NO YES

If yes, give the date and explain fully on an additional piece of paper if more space is needed

Education

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4

Schools	Name and Location	Dates Attended	Coursed of Study	Degree/Diploma
High School				
		to		
Community College or College or University		to		
		to		
		to		
		to		
Graduate or Professional		to		
		to		
Educational, Vocational Schools, etc.		to		
		to		
		to		

Child care training you have completed in the last three years (such as first aid, CPR, Child Care Credential, CDA):

References: List the names, addresses and phone numbers of two people we may contact as references:

Work History - List child care/early childhood experience first

Current or Last Employer			Address		
Job Title			Supervisor's Name		No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ Per	Ending Salary \$ Per	Reason for leaving	May we contact employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Date Separated (mo/yr)			Duties:		
Full Time	Years	Months			
Part Time	Years	Months			
If part time, number of hours per week					

Current or Last Employer			Address		
Job Title			Supervisor's Name		No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ Per	Ending Salary \$ Per	Reason for leaving	May we contact employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Date Separated (mo/yr)			Duties:		
Full Time	Years	Months			
Part Time	Years	Months			
If part time, number of hours per week					

Current or Last Employer			Address		
Job Title			Supervisor's Name		No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ Per	Ending Salary \$ Per	Reason for leaving	May we contact employer? <input type="checkbox"/> yes <input type="checkbox"/> no	
Date Separated (mo/yr)			Duties:		
Full Time	Years	Months			
Part Time	Years	Months			
If part time, number of hours per week					

I certify that I have given true, accurate, and complete information on this form to the best of my knowledge. In the event that confirmation is needed in connection with my work, I authorize educational institutions, associations, registration, and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigations of all statements made in this application and understand that false information of documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or dismissal if I am employed, and (or) criminal action. I further understand that dismissal on unemployment shall be mandatory if fraudulent disclosures are given to meet position qualifications.

Signature of Applicant _____ Date _____

Please answer the following questions:

1. Why do you feel that childcare is the field in which you wish to work? _____

2. What does developmental appropriateness mean to you? _____

3. Are you a team player? Give me an example of how you can be a team player. _____

4. How do you feel about corporal punishment? _____

5. How important is it to you to have a working relationship with parents? _____

6. What are your educational goals? _____

7. Please list any experience you have had working with children. _____
