

Kiddie College of South Miami corp.
13291 SW 42 St
Miami, Fl 33175-3205
305-552-6047

**Pre-Employment
 Questionnaire
 An Equal
 Opportunity Employer**

Application for Employment

Personal employment

<u>Name (last name first)</u>			<u>Social Security #:</u>		
<u>Present address:</u>		<u>Apt. no.:</u>	<u>City:</u>	<u>State:</u>	<u>Zip:</u>
<u>Permanent address:</u>		<u>Apt. no.:</u>	<u>City:</u>	<u>State:</u>	<u>Zip:</u>
<u>Home Phone#:</u>	<u>Cell Phone #:</u>		<u>DOB:</u>	<u>Are you 18 yrs or older:</u> <input type="checkbox"/> yes <input type="checkbox"/> no	<u>Gender:</u> M ___ F__
Do you speak English <input type="checkbox"/> Yes <input type="checkbox"/> No : Spanish <input type="checkbox"/> Yes <input type="checkbox"/> No			Do you Write English <input type="checkbox"/> Yes <input type="checkbox"/> No : Spanish <input type="checkbox"/> Yes <input type="checkbox"/> No		
<u>Position:</u>		<u>Date you can start:</u>	<u>Salary desired:</u>		
<u>Are you employed now:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>If so may we inquire of your present employer:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No		<u>Do you have family working in the company?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<u>Ever applied for this company before:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No		<u>When:</u>			

Who referred you to this company:

- Employment agency Newspaper advertising Friend
 State Employment Office college placement service
 walk in other _____

Status: Married _____ Single _____ Divorced _____ # of children: _____ Ages: _____

Spouse's Work Place: _____ Phone: _____

School level	Name and location of school	No. of yrs attended	Did you graduate	Subjects studied
Grammar school				
High School				
College				
Trade, Business, or correspondence school				

CDA-FCCPC : YES NO

45 hrs FL. Dep. Children and Families : YES NO

First Aid: YES NO

CPR: YES NO

Finger Print : YES NO Date _____

Are you studying now : Yes No

Do you wish to continue studying in the future: Yes No

What : _____

References:

Below give the names of three people you are not related to, whom you have known for at least one year.

	Name	Phone	Business	Yrs. Acquainted
1				
2				
3				

Job Experience:

List your last 3 employments

1	
2	
3	

Authorization

"I certify that the facts contained in this application are **True** and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and the employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have. Personal or otherwise and release the company from all information and release the company from all liability for any damage that may result from all utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the forgoing, unless it is in writing and signed by and authorized company representative."

X :

Date

Signature

Received By: _____ Date: _____