



O T H E R E X P E R I E N C E	Please list most recent to least recent positions held. Attach supplementary sheet for extra space, if needed.					
	Company Name	City and State	Position	Position Description	Full or PartTime?	Salary

R E F E R E N C E S	List any principals, superintendents, professors, pastors, etc. and/or others who have known you, and your training.			
	Name	Position	Address	Telephone

Other distinctions or honors _____

Are you a member of any educational and/or professional organizations? _____

I certify that my answers on this application and on any resume I provide are complete and true. I understand that the submission of any false or incomplete information in connection with my application, whether on this or other documents, or in interviews, will be cause for the rejection of my application or the termination of my employment status at any time.

Print Name: _____ Signature: _____ Date: _____



Criminal Summary Release

BACKGROUND INVESTIGATION CONSENT

I, _____, hereby authorize Prairie Life Learning Center and/or its agents to
(applicant's complete name)

make an hereby authorize Kiddos Learning Center and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information, which may be material to my qualifications as a volunteer or for employment now, and if applicable, during the tenure of my volunteering or employment with Kiddos Learning Center.

I release Kiddos Learning Center and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge.

Full name: _____
(Printed) Signature Date

Maiden name or other names used (Please Print)

All Aliases (Last Name Only) (Please Print)

Present Street Address How long?

City/State Zip

Former Street Address How long?

City/State Zip Date of Birth

Social security #

Driver's license #

State of license



Reference Verification and Information Release to:

I authorize administrative staff making inquiry on behalf of _____ to obtain from the references and past employers listed on the employment application attached to this form any and all information concerning my previous employment from schools, landlords, employers, individuals, and staff administrators. Pertinent information they may have, personal or otherwise, is not limited to on-the-job achievement, performance, attendance, personal history, credit history, disciplinary action, and arrest or conviction records. I hereby direct you to release upon request such information (whether favorable or unfavorable) to any representative of

presenting this authorization or a photocopy of it.

I release all parties from all liability for any damage that may result from furnishing of information or any attempts to comply with this authorization.

This authorization shall be void after I have completed 6 months of satisfactory employment.

Signature

Date