



Oshkosh Child Development Center Employment Application

660 N Main St

(920) 267-8101

oshkoshchilddevelopment@yahoo.com

APPLICANT INFORMATION:

FULL NAME: _____ DATE: _____

ADDRESS: _____ CITY: _____

PHONE NUMBER: _____ OK TO TEXT? ☐ YES ☐ NO

EMAIL ADDRESS: _____

OVER 18 YEARS OLD: ☐ YES ☐ NO

AVAILABILITY:

PREFERRED SHIFT: ☐ ANYTIME ☐ 1ST ☐ 2ND

DATE AVAILABLE: _____

SEEKING: ☐ FULL TIME ☐ PART TIME ☐ SUBSTITUTE/ON CALL

POSITION: ☐ LEAD TEACHER ☐ ASSISTANT TEACHER ☐ KITCHEN ☐ FLOAT STAFF

PREFERRED AGE: ☐ ANY ☐ INFANT ☐ TODDLER

☐ 2 YR OLD ☐ PRE-K/SCHOOL AGE

EDUCATION & TRAINING:

HIGHEST EDUCATION COMPLETED: ☐ HS DIPLOMA/GED ☐ COLLEGE CREDITS

☐ CDA CREDENTIAL ☐ ASSOCAITES ☐ BACHELORS ☐ MASTERS

MAJOR/FIELD OF STUDY: _____ YEAR: _____

CERTIFICATES HELD: _____

EMPLOYMENT HISTORY:

COMPANY: _____ DATES: _____ TO _____
ADDRESS: _____
PHONE: _____ SUPERVISOR: _____
JOB TITLE: _____ CONTACT FOR REFERENCE: ☐ YES ☐ NO

COMPANY: _____ DATES: _____ TO _____
ADDRESS: _____
PHONE: _____ SUPERVISOR: _____
JOB TITLE: _____ CONTACT FOR REFERENCE: ☐ YES ☐ NO

EXPERIENCE:

WHAT IS YOUR EXPERIENCE WORKING WITH CHILDREN:

REFERENCES:

NAME: _____
☐ PERSONAL - RELATIONSHIP _____
☐ PROFESSIONAL - COMPANY _____
EMAIL: _____ PHONE: _____
NAME: _____
☐ PERSONAL - RELATIONSHIP _____
☐ PROFESSIONAL - COMPANY _____
EMAIL: _____ PHONE: _____

I AUTHORIZE THAT THE ABOVE INFORMATION IS ACCURATE:

PRINT NAME: _____
SIGNATURE: _____ DATE: _____