

TEAM ONE SUPERVISORY STAFF MUST COMPLETE THIS SECTION

POSITION APPLIED FOR _____ **DATE OF HIRE** _____

COUNTY OF SERVICE _____ **HOURLY WAGE** _____

**Talladega, Clay, Randolph Child Care Corporation and affiliates
EMPLOYMENT APPLICATION for TEAM ONE Employees**

TCR Child Care Corporation is an At-Will Employer – HOURLY NON-EXEMPT POSITION.

Requirements of Employment

READ PRIOR TO COMPLETING APPLICATION

Applicant must be at least 21 years of age. This position requires the operation and/or use of a personal vehicle to carry out the duties of the position, and requires a valid Alabama drivers license, continuous automobile liability insurance (\$100,000/\$300,000 /\$50,000limits), and a good driving record as evidenced by annual MVR (Motor Vehicle Report) prior to employment. Have you been employed by the State Dept. of Human Resources during the past two years? _____ (yes or no). If yes, give dates, position, and county.

All positions require a Criminal Background Check (ABI and FBI) and clearance through the Central Registry for Child Abuse and Neglect prior to employment, a TB Skin Test, copies of driver’s license and social security card, and reference checks. **Initial here to authorize reference checks** _____.

I am physically able to perform the duties of this position as outlined in the attached job description. _____ Yes
_____ No. I further understand that I may be asked at any time during my employment to provide medical verification and submit to random alcohol and/or drug screening at my own expense if needed.

Before I continue this application, my initials indicate that I meet the requirements and agree to the requirements of employment if hired.

Initial here for agreement

PERSONAL DATA

NAME _____
(LEGAL NAME AS IT APPEARS ON SOCIAL SECURITY CARD)

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP CODE)

PHONE NUMBER _____ Alternate Number _____

Email address: _____

EDUCATION (Copy of HS diploma or transcript with graduation date, or GED certification is required)

SCHOOL	NAME & LOCATION	MAJOR (if applicable)	# YRS. COMPLETED	DID YOU GRADUATE	DEGREE/ DIPLOMA
GRADUATE DEGREE					
COLLEGE					
BUSINESS/ TRADE/ TECHNICAL					
HIGH SCHOOL					
GED					

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. Previous employers will be contacted to verify information. If additional space is required use back of sheet.

1. COMPANY NAME _____ PHONE _____
FULL ADDRESS _____
Dates employed _____
NAME OF SUPERVISOR _____
JOB TITLE AND DESCRIPTION OF YOUR WORK _____
REASON FOR LEAVING: _____

2. COMPANY NAME _____ PHONE _____
FULL ADDRESS _____
Dates employed _____
NAME OF SUPERVISOR _____
JOB TITLE AND DESCRIPTION OF YOUR WORK _____
REASON FOR LEAVING: _____

3. COMPANY NAME _____ PHONE _____
FULL ADDRESS _____
Dates employed _____
NAME OF SUPERVISOR _____
JOB TITLE AND DESCRIPTION OF YOUR WORK _____
REASON FOR LEAVING: _____

List business persons know, but not related to you for at least three years who have knowledge of your professional skills, work habits, and attendance record for references.

- | | | |
|----|---|---|
| A. | Name _____
Address _____
City _____ | Phone _____
Years known _____
Business Name _____ |
| B. | Name _____
Address _____
City _____ | Phone _____
Years known _____
Business Name _____ |
| C. | Name _____
Address _____
City _____ | Phone _____
Years known _____
Business Name _____ |

My signature here authorizes contact with references to verify employment dates, job responsibilities, eligibility for re-hire, etc. _____

Signature

Date

Have you ever been arrested, charged, or convicted of a criminal offense? _____ YES _____ NO

If yes, give details of when, where, and the nature of the incident. _____

Have you ever been investigated for suspected adult or child abuse or neglect? _____ YES _____ NO

If Yes, give details of charges when, where, and the nature of the incident. _____

Are you related to or personally acquainted with anyone currently working at the DHR office where you will be assigned?

_____ YES _____ NO. If yes, did the individual refer you to this position, give details, relationship, length of time known, etc. _____

Have you ever been employed by Talladega Clay Randolph Child Care Corporation or any of its affiliates (Child Development Centers, Cheaha Regional Head Start, TEAM ONE, Child Care Central or Child Care South)? _____ Yes _____ No If yes please list the dates, the position and name of your immediate supervisor.

Please Read and INITIAL Each Paragraph Below (if there is any part of this page you do not understand, please ask the interviewer about it before signing). TEAM ONE is a division of TCR Child Care Corp.

_____ I understand that nothing contained in the application or conveyed to me during any interview that may be granted is intended to create an employment contract, implied or explicit, between TCR Child Care Corporation and me. In addition, I understand and agree that if I am employed; my employment relationship with TCR Child Care Corporation is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or TCR Child Care Corporation, and that no promises or representations contrary to the forgoing are binding on TCR Child Care Corporation unless made in writing and signed jointly by the Executive Director and myself.

_____ I understand and agree that any future changes in my title, duties, compensation, working conditions, location, and/or TCR Child Care Corporation benefits, policies and procedures will not alter our at-will status.

_____ I agree to abide by the TEAM ONE Employee Handbook and DHR guidelines as applicable.

_____ I understand that I will be required to possess a current and valid Alabama driver's license and understand that I will be required to provide proof of liability insurance at all times, if at any time I use my personal vehicle for work related purposes. I understand that I must furnish a Motor Vehicle Report (MVR) verifying a good driving record before hire and annually thereafter. I understand that failure to have required limits (\$100,000/\$300,000/\$50,000) liability insurance on any vehicle driven on the job, a valid Alabama Driver's License or satisfactory MVR will result in termination.

_____ I understand that references listed may be contacted by mail or telephone and I have given authorization for contact.

_____ I understand that good attendance and punctuality are requirements for this position.

_____ I verify that I am not related to anyone working for TEAM ONE or DHR at the site where I am to be employed. I further understand that I must reveal this information prior to my employment.

_____ I hereby attest that I have read and fully understand the qualifications, terms of employment and performance responsibilities of the position for which I am making this application. Furthermore, I attest that I meet the qualifications for the position, and that I recognize and acknowledge that it is my responsibility, should I be hired, to develop and refine those skills which will enable me to meet the performance responsibilities in order to continue in the employment of TEAM ONE.

_____ I hereby certify that I am physically able to perform the duties of this position as outlined in the job description and that I may be asked to provide medical certification at any time.

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document.

Applicant's Signature

Date

Print Name