

# 118 Clay Street, Kingsport, TN 37662 Phone: (423) 392-4675 kcdc118@gmail.com

Date:	Date of Birth:		Position Applied for:		
Name:			SS #:		
Last	First	Middle			
Address:					
Str	eet/PO Box	City	State	Zip	
Telephone N	umber:				
	Home		Cell		
Are you 18 or older?		Next of Kin:			
		Contact #:			
Education	/Military Service:				
Dates	School/Institution	Ac	ldress	Diploma/Degree	

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#### Employment History: Most recent first.

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Dates	Place of Employment / Address and Phone #	Position	Reason for leaving		

Are there any previous employers you wish us not to contact?

# Educational Training/ Experience: (workshops, conferences, course work within the last 6 months)

Date	Training	Location	Hours Credited

List other experience you	have had with children:
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### **References:** Please attach a copy of your resume. List 3 non-relative references.

Name/Title	Phone #	Address	Length of Time Known	Relationship

## Declarations: (Excluding charges that were FULLY cleared)

- 1. Have you ever been under investigation for neglect or abuse of children?
- 2. Have you ever been under investigation for any sexual offense?
- 3. Have you ever been convicted of a felony including any involving a suspended sentence?
- 4. Have you ever been convicted of or pled guilty to any offense involving the manufacturing, sale, distribution or possession of an illegal substance?

If you answered Yes to any of the above declarations please describe the offense, where and when it occurred.

I confirm that the information provided is accurate and true.

Signature:

Date:

**Note:** We adhere to a **No Smoking** policy which became effective October 1, 2007. Smoking is permitted in designated area only **and never in sight of children or parents.**