

## **Employment Application**

An Equal Opportunity Employer

It is the policy of the Woodburn Family Learning Center (WFLC) to select applications on the basis of their qualifications and ability to perform the job. Woodburn Family Learning Center is committed to provide equal employment opportunity in accordance with applicable state and federal law. Please notify us if you need any accommodations or assistance with any part of our application process.

Personal Information						
Date:						
Last Name:		First Name:	Middle:			
Mailing Address:						
City:		State:	Zip:			
Telephone Number:						
E-mail address:						
		O				
		General Informatio	on			
Position Applied For:	☐ Teacher	☐ Teacher Aide	□ Cook			
Available to Work:	☐ Full-time	☐ Part-time	☐ Temporary	☐ On-Call		
When would you be av	vailable to start?	?				
Have you ever been employed by WFLC before?			□ Yes	□ No		
Do you have family members employed by WFLC?			☐ Yes	□ No		
Are you able to perform the essential functions of the job for which you are applying?			□ Yes	□ No		
I understand that this is an application for employment and no employment contract is being offered.			□ Yes	□ No		
•	_	nyself with all rules and they presently exist or a	_	□ Yes	□ No	
_	thout cause and	d with or without notice	ation can be terminated e, at the option of either	□ Yes	□ No	

## **Work History**

Please list your present and past work experience for the last 3 years beginning with your current job. You may include volunteer activity / positions and military services. An additional page may be attached if necessary.

Name of Employer / Organization:		Telephone:	
Address:			
Position:	_ Start Date:	_ End Date:	
Description of Duties:			
Reason for Leaving:			
Name of Employer / Organization:		Telephone:	
Address:			
Position:	_ Start Date:	_ End Date:	
Description of Duties:			
Reason for Leaving:			
Name of Employer / Organization:		Telephone:	
Address:			
Position:	_ Start Date:	_ End Date:	
Description of Duties:			
Reason for Leaving:			

## **Education**

High School Other		
Other		
Other		
Other		

Other					
Other					
Please summarize any skills, tra- to perform job related functions	=			ualify you as bei	ng able
List three (3) non-relatives famil		ences	ual work history	and abilities	
Name			Years Known		
Name	Occupation / Re	iationship	Years known	Telephor	ie:
	l .		<u> </u>	<u> </u>	
Why do you want to be conside	red for employment	here?			
Will you need special accommo	dations during the hi	ring proces	s?	□ Yes	□ No
If yes, please indicate w	_				
ii yes, piease muicate w	nat may be done to	accommod	ate you		
I certify that all my answers and and complete without omission		application	are true	□Yes	□No
I authorize all previous employe	rs and supervisors to	o give WELC	's raprasantativ	oc any	
and all information regarding m	·	_	•		
and all previous employers and result from furnishing informati		oility for any	y damages that r	nay □ Yes	□ No
-				□ 1c3	□ NO
I understand if hired that I will be and my legal right to work in the	•	•		☐ Yes	□ No
I have read, understand, and ag	ree with the above.				
2 2 2 2 2 2 3 2 3 2 3 3 3 3 3 3 3 3 3 3					
Signature:			Date:_		