



Employment Application

Only Love Children's Centers

2581 Howe Ave. Sacramento, CA 95821

Phone (916) 920-8724 Fax (916) 920-5859

Date: _____ Position(s) Applying For: _____

Desired Salary _____ Date able to begin work: _____

Full Name: _____

Current Address: _____

Phone Number: _____

DL/ID# _____ Social Security last 4 digits # _____ (Will need full upon employment)

Do you have any specific hours that you cannot work? If yes, when? _____

Are you able to work Part-Time if needed? _____

Would you be able occasionally to work split shift if needed? _____

Are you able to work overtime when needed? _____

Are you willing to work a flexible schedule? _____

Are you currently working? _____

Do you have a High School Diploma? _____

Are you over 18 years old? _____

Are you eligible for employment in the country? _____ Must present verification upon hiring

Do you have any ECE units? _____ If yes, how many? _____

Are you willing to take more classes if needed? _____

Do you currently have CDE issued Child Development Permit? _____ If yes, what type? _____

Do you have any health restrictions that will prevent you from working with children? NO YES

If YES, explain: _____

Have you ever been convicted of a felony in the last seven years? NO YES

If YES, explain: _____

At OLCC, you will be asked to take a full background check and fingerprints clearance to be an eligible employee. (Please circle one) I Agree Do Not Agree

If hired, you must attend all staff meetings, school functions, and staff work days either after hours or weekend. (Please circle one) I Agree Do Not Agree

Have you ever worked with children ages 3-5? _____ if yes, how Long? _____



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Required Information

If hired, all applicants must provide to Only Love Children's Centers proof of the following documents that are applicable:

1. Fingerprint clearance from the Department of Justice.
2. Clearance from the FBI;
***A \$97.00 Fee is required by the live scan to process your clearance. OLCC will pay this fee amount up front. However, if your employment is less than 6 months with our centers this fee amount will be deducted from your last paycheck. Agreement initial _____*
3. You might be called for random Drug Testing as part of regulations
4. All employees MUST have "Mandated Reporter" training certificate issued by DSS.
5. Health Screen (Physical)
6. Immunization Records (see director for current requirements)
7. T.B. Test
8. Transcripts – ECE units
9. CPR Certification (see director for more info)
10. References (Persons will be contacted)



I agree to provide all of the above requirements upon hiring as applicable. I will ask director for more information if needed.

Applicants Signature _____

Date _____/_____/_____



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EMPLOYMENT HISTORY

1. Please attach your resume
2. Attach any copies of certifications/degrees to your application if applicable.
3. Fill out Present or Last Employer Information:

Employer Name:	Start Date:	May we contact for Reference? YES NO If no, explain:
Telephone:	End Date:	
Immediate Supervisor:	Wage Amount:	
Address:		Phone:
Duties:		
Reason for leaving:		

Employer Name:	Start Date:	May we contact for Reference? YES NO If no, explain:
Telephone:	End Date:	
Immediate Supervisor:	Wage Amount:	
Address:		Phone:
Duties:		
Reason for leaving:		

Employer Name:	Start Date:	May we contact for Reference? YES NO If no, explain:
Telephone:	End Date:	
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Have you ever worked for OLCC or filled out an application with OLCC? _____

If Yes, Approximate date: _____

REFERENCES - Please List three (3) Business Supervisors you have worked for:

Name and Occupation	Telephone	Years Known

EDUCATIONAL BACKGROUND

School Name & City, State	No. Years completed	Total ECE Units with C & higher grade level	Degree/ Diploma	Graduated Y / N

Do you speak any language(s) other than English? _____ If yes, what _____

Other qualifications or skills? (Exclude information, which would reveal sex, race, religion, national origin, age, color, disability or other protected status.) _____

How would you describe your personality? _____

Add any additional information to be considered for a position at OLCC and why would you like to work in an environment with children?



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It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representative for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without prior notice. I understand that no representative of the Employer has the authority to make any assurance to the contrary.

Signature of Applicant _____

Date _____

Application Reviewed by: _____ Date: _____

Accepted Denied Reason: _____

Interview scheduled on: _____

Admin.notes: _____

*Thank you for your interest to join
Only Love Children's Centers!*