



5110 Tuxedo Boulevard
 Bartlesville OK 74006
www.DelawareChild.org

Applicant for Employment

PERSONAL

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Other Telephone _____

E-mail address _____

Position(s) applied for: _____ Date _____

Location or Site _____ Date Available _____

Have you been employed previously by Delaware Tribe of Indians or Delaware Child Development? Yes No

Do you have the legal right to work permanently in the United States? Yes No

Have you ever been convicted of a felony? If yes, explain. Yes No

Can you travel if the job requires it? Yes No

Do any of your relatives or residents of your home work for Delaware Child Development or serve on the Board of Directors? If yes, state name, relationship and location. Yes No

EDUCATION

Do you have a degree or certificate in Early Childhood Education? Yes No

School	Name and Location	Course of Study	# Years Completed	Diploma Degree
High School				
College				
Grad/Professional				
Other (specify)				
Other (specify)				

WORK RELATED REFERENCES

Do not include family members.

Name	Phone Number	Best time to call	Occupation

WORK EXPERIENCE

Employer _____	Dates Employed _____	Work Performed
Address _____	From _____ To _____	
Telephone _____	Hourly Rate/Salary _____	
Job Title _____	Start _____ Final _____	
Supervisor _____		
Reason for leaving _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer _____	Dates Employed _____	Work Performed
Address _____	From _____ To _____	
Telephone _____	Hourly Rate/Salary _____	
Job Title _____	Start _____ Final _____	
Supervisor _____		
Reason for leaving _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer _____	Dates Employed _____	Work Performed
Address _____	From _____ To _____	
Telephone _____	Hourly Rate/Salary _____	
Job Title _____	Start _____ Final _____	
Supervisor _____		
Reason for leaving _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete. I authorize Delaware Child Development to obtain a criminal background check and any other necessary consumer report. I further authorize former employers, education institutions and persons to release information they may have about me to Delaware Child Development. I release all parties involved from any liability and responsibility for having furnished such information in good faith.

I hereby understand and acknowledge that any employment relationship with this organization is of an "at will" nature, which means the Employee may resign at any time and Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant

Date