



Kingdom Builders for CCC
 P.O Box 123
 Marlin, Texas 76661
 Ph. 254-883-3366

Application for Employment

PLEASE PRINT

FIRST NAME	LAST NAME	MIDDLE INITIAL	DATE
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PERMANENT ADDRESS		
CITY	STATE	ZIP

PHONE NUMBER	SOCIAL SECURITY NUMBER
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Residential History- Please list the last 4 residences. List most recent residences first.

DATE	ADDRESS
DATE	ADDRESS
DATE	ADDRESS
DATE	ADDRESS

Are you at least 18 years old? Yes No

In some states and for some positions, KBFCCC may consider you for employment if you are under age 18. Alternately, in some states and for some positions, state law may require that you be a minimum of 18 years of age, for employment.

Position Applying for: _____

Have you been informed of, understand and have the ability to perform the essential functions of the job with or without accommodation?

Yes No

Number of Hours/Week Desired _____

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

If you are applying for a position which required the operation of a motor vehicle, owned or leased by KBFCCC, or if you must use your own vehicle for company purposes, please complete the following.

Do you have a valid driver's license? Yes No

If "Yes" indicate

STATE	NUMBER
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Do you have a special operator's license? Yes No

If "Yes" indicate

STATE	NUMBER
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Have you been convicted of any moving violations or been involved in a vehicular accident in the last 3 years? Yes No

DATE	DESCRIPTION OF VIOLATION OR ACCIDENT	CONVICTED?			FINE PAID?		
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

EDUCATION

HIGH SCHOOL
COLLEGE
OTHER: BUSINESS, TRADE, TECHNICAL

NAME		
LOCATION	# OF YEARS ATTENDED/HIGHEST CLASS	
NAME		
LOCATION	# OF YEARS ATTENDED/HIGHEST CLASS	
DEGREE OR CERTIFICATE	COURSES	HOURS COMPLETED
NAME		
LOCATION	# OF YEARS ATTENDED/HIGHEST CLASS	
DEGREE OR CERTIFICATE	COURSES	HOURS COMPLETED

EXPERIENCE: List all previous work experience. List the most recent employer first. Include all military service and status of discharge(s) from the military. You should list volunteer experience in addition to paid work experience. Prior employers listed under "Experience" may be contacted.

COMPANY NAME	POSITION HELD	ADDRESS PHONE NO.
RESPONSIBILITIES		DATES EMPLOYED FROM: TO:
REASON FOR LEAVING	SUPERVISOR PHONE NO.	SALARY START: FINISH:
COMPANY NAME	POSITION HELD	ADDRESS PHONE NO.
RESPONSIBILITIES		DATES EMPLOYED FROM: TO:
REASON FOR LEAVING	SUPERVISOR PHONE NO.	SALARY START: FINISH:
COMPANY NAME	POSITION HELD	ADDRESS PHONE NO.
RESPONSIBILITIES		DATES EMPLOYED FROM: TO:
REASON FOR LEAVING	SUPERVISOR PHONE NO.	SALARY START: FINISH:

COMPANY NAME	POSITION HELD	ADDRESS PHONE NO.
RESPONSIBILITIES		DATES EMPLOYED FROM: TO:
REASON FOR LEAVING	SUPERVISOR PHONE NO.	SALARY START: FINISH:

Have you ever been discharged or forced to resign from a position? Yes No

ADDITIONAL REFERENCES: (Business/Professional other than former supervisors) Family members, significant others and close personal friends are not acceptable.

NAME	RELATIONSHIP	PHONE NO.	OCCUPATION	YEARS KNOWN

Have you ever been convicted, plead guilty, or plead nolo contendere to any of the crimes listed on the next page? (In answering this question, do not provide information concerning any criminal history records that have been ordered sealed, expunged, or impounded.)

Yes No If "Yes", please state the nature of the offense, where the offense occurred, date and sentence imposed.

DISQUALIFYING CRIMES

Any employee or potential employee who is convicted, pleads guilty, or pleads nolo contendere to any of the following crimes will be disqualified from working at KBFCCC unless otherwise provided by applicable law.

CRIMES AGAINST OR RELATED TO A CHILD	SEXUAL CRIMES	OTHER CRIMES
<ul style="list-style-type: none"> Child abuse Permitting child abuse Abandonment Endangerment Child abduction Child Pornography Sexual abuse of a minor Sexual exploitation of a minor Corruption of a minor Crimes contributing to the delinquency of a minor Negligent treatment of children Any crimes listed in the following sections which relate to a minor Any criminal attempt, criminal solicitation or criminal conspiracy to commit any of the above named offenses Crimes involving conduct similar to those listed above 	<ul style="list-style-type: none"> Sexual abuse Sexual exploitation Sexual misconduct Sexual mischief Molestation Rape Carnal abuse Sale or exhibition of obscene materials Sodomy Incest Any no-consensual or forcible sexual acts Enticement for immoral purposes Prostitution Pandering Promoting prostitution Obscenity Public sexual indecency Indecent exposure Criminal attempt, criminal solicitation or criminal conspiracy to commit any of the above named offenses Crimes involving conduct similar to those listed above 	<ul style="list-style-type: none"> Homicide Manslaughter Vehicular homicide Mayhem Assault or aggravated assault Battery or aggravated battery Reckless endangerment Kidnapping Unlawful imprisonment Making terroristic threats Sale, distribution or transportation of, offer to sell, transport or distribute or conspiracy to sell, transport or distribute marijuana or narcotic drugs Theft Burglary Robbery or aggravated or armed robbery Arson Domestic violence Gross irresponsibility or disregard of safety of others Any criminal offense involving fraud or dishonesty Criminal attempt, criminal solicitation or criminal conspiracy to commit any of the above named offenses Crimes involving conduct similar to those listed above

Conviction of a crime is not an automatic bar to employment with KBFCCC. However, some positions may not be held by persons convicted of certain crimes in accordance with state and federal law.

OFFICE SKILLS

Calculator	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you ever done...		
Computer	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Journal Entries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Type _____			Payroll	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Spreadsheet	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Accounts Payable	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Program _____			Accounts Receivable	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Word Processing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Bank Reconciliation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Software _____			Data Entry	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			Data Filing	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Do you have other experience, skills, or training which you feel would qualify you for work with KBFCCC?

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Why would you be a good hire for KBFCCC

2. If a child is a consistent biter, what would you do in your classroom to prevent and future incident and protect the other children?

3. What actions would you take for parents who are unsupportive and uncooperative to suggestions?

4. How would you handle disagreements between you and management and co-workers?

5. What learning centers and equipment would be appropriate in the room for which you are applying?

6. What are your strengths?

7. What are your weaknesses?

PLEASE READ CAREFULLY
APPLICANT CERTIFICATION, AGREEMENT AND RELEASE

I, _____(print your name), understand that any false answers or statements or omissions made by me on this application or any supplement thereto or any false statements made to a representative of KBFCCC during the interview process, will be sufficient grounds for immediate discharge, no matter when discovered.

I understand that while it is expected that the relationship between myself and KBFCCC is mutually beneficial, I recognize that employment with KBFCCC is not for a specific term and can be terminated by me or KBFCCC at any time, for any reason, with or without cause. I understand that, if hired, I will be considered an employee at-will and nothing herein shall be construed as a contract of employment. I understand that my at-will employment status cannot be changed or modified by any oral representation made by any KBFCCC employee or representative, and further that any change in my at-will employment status must be made in writing and specifically state that it modifies the at-will employment status, which can be signed only by KBFCCC Owner and Director.

I agree that if I am employed by KBFCCC, sometime in the future some potential employer may contact KBFCCC or its representatives concerning my work record and my work performance at KBFCCC. I hereby consent to and authorize persons employed by KBFCCC to divulge any and all information they consider relevant to any person representing themselves to be an employer or potential employer of mine with respect to my work record and/or performance of my duties as an employee of KBFCCC, I must hold in confidence any and all information that I come in contact with regarding my employer or its business

I understand that any potential offer of employment is conditional pending the results of employment and other references required by KBFCCC, the results of any local, state required, or federal criminal background check(s) and/or satisfaction of all state licensing requirements, which may include medical or drug testing where applicable by law. I understand that the references and criminal background check(s) will be used, among other things, to determine my suitability for employment with KBFCCC

I have read and agree to the preceding Applicant Certification, Agreement and Release and further understand and agree that a copy of this Certification, Agreement and Release shall be as valid as the original.

APPLICANT'S SIGNATURE	DATE:
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CRIMINAL BACKGROUND CHECK RELEASE

I authorize the release of all criminal records maintained by local, state, and federal criminal records bureaus, agencies and departments, where allowed by law, including child abuse and child protection registries, to KBFCCC. I understand that this information will become part of my employment record with KBFCCC and may be used to determine my eligibility for employment or continued employment with KBFCCC.

I hereby unconditionally release KBFCCC and any local, state, and federal bureau, agency and department and their agents, employees, officers or directors from any and all legal liability in any way related to or arising from the provisions or utilization of such records.

A photocopy of this release shall have the same force and effect as the original release signed by me.

EMPLOYEE/APPLICANT'S SIGNATURE
EMPLOYEE/APPLICANT'S NAME (PLEASE PRINT)
ADDRESS

REFERENCE CHECK RELEASE

I authorize any person, including but not limited to any school, current or past employer, organization or entity disclosed in my application, resume, or interview, to provide any information regarding me, including, without limitation, information concerning my performance, reputation, character, and fitness to supervise children excluding medical records information. I acknowledge that the information divulged may be used by KBFCCC to determine my eligibility for employment or continued employment KBFCCC.

I unconditionally release any person, school, employer, organization, or entity from any and all legal liability for providing such information and in making any statements about me to KBFCCC.

A photocopy of this signed release shall have the same force and effect as the original release signed by me.

EMPLOYEE/APPLICANT'S SIGNATURE
EMPLOYEE/APPLICANT'S NAME (PLEASE PRINT)
ADDRESS