



Harvard Academy

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Sunrise, FL 33351
(954) 748-0006

harvardacademy@earthlink.net

Application

We are an equal opportunity employer. We do not discriminate against age, color, race, religion, sex, disability, marital status, or political beliefs. Federal law prohibits the employment of unauthorized aliens. All hired personnel must submit proof of employment authorization and identity within 3 days of hire date. Failure to do so shall result in immediate termination.

Date: _____

First Name: _____ Last Name: _____

Address: _____ City: _____ Zip: _____

Have you lived there for **LESS** than 7 years? _____ If yes, please list your previous address:

City: _____ Zip: _____

Have you lived in Florida for less than 5 years? YES NO If yes, please list the states in which you lived for the past five years: _____

Cell Phone: _____ Alternate Phone: _____ Email: _____

Date of Birth: _____

Driver's License Number: _____ Issued Date: _____ Expiration Date: _____

Do you have a CDL? YES NO If yes, list your endorsements: _____

Have you ever been convicted of a crime? _____ If yes, explain: _____

Do you have aliases or other names you have used? _____ If yes, please list: _____

Social Security #: _____ Number of Dependents (not including yourself): _____

Do you have children? _____ If yes, will they be attending Harvard? _____ If yes, what is/are his/her/their ages? _____

High School Name: _____ Graduation Date: _____

City and State: _____ GPA: _____

College Name: _____ Graduation Date: _____

City and State: _____ GPA: _____

Major: _____

List any certificates earned or in progress, any additional training programs not included in your formal education, and/or hobbies or specialties that you could teach children: _____

Position Desired: _____ Salary Desired: \$ _____ per _____

Full Time _____ Part-Time _____ Number of Hours per Week: _____ Can you work overtime? _____

What date could you start work? _____

Please list 3 **professional** references –

Name	Title	Company	Phone	Relationship & # of yrs known

Have you ever worked at a childcare facility (a) whose license was revoked, denied, or suspended, (b) been the subject of disciplinary action, or (c) received a fine(s) during your employment? (a) _____ (b) _____ (c) _____ If yes, please explain: _____

Current or most recent employer: _____ May we contact them? _____

City and State: _____ Phone Number: _____

Dates of employment: _____ to _____ Salary: _____ per _____

Position held: _____ Supervisor's Name and Title: _____

Reason for leaving: _____

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Investigative background inquiries are made for all applicants. Information collected may include previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. I authorize any party or agency contacted to furnish any information and release all parties involved from liability and responsibility for doing so.

Applicant's Signature: _____ Date: _____