

Kids and Company of Linn County KIDCO HEAD START/EARLY HEAD START

300 Market Street, Suite 200, Lebanon, Oregon 97355 (541) 451-1581 FAX (541) 259-1581 www.kidcoheadstart.org

APPLICATION FOR EMPLOYMENT

Name				
(Last)	(First)		(Middle)	
Address (Number & Street)		(City)	(State)	(Zip)
Mailing Address(if different)				
Phone:				
For what position are you applying	?			
Where did you learn about this job	announcement?			
Check the location(s) in which you Sweet Home-Sunnyside Sweet Home-Crawfordsville Philomath Harrisburg Albany-South Albany EHS Sweet Home – High School	☐ Corvallis☐ Jefferson☐ Lebanon☐ Albany – Riverside☐ Albany – Periwinkle (LBCC)	Screened Interviewed □ No □ Yes	day of week/month/d	month/day/year month/day/year ay/year/time
☐ EHS Albany – LBCC Center		□ No	Phone call:	month/day/year
Date available for work?		Office Visit		month/day/year
May we contact your previous employers and/or supervisors?	☐Yes ☐No	First day of Em		month/day/year
Do you have a valid Oregon Driver's License?	☐Yes ☐No	Last day of Emp	•	month/day/year
Do you have a car or could you get one to use on the job?	□Yes □No	Registry #	und Registry:Expiration	Date verified 1: month/day/year
Are you a current or former Head Start/Early Head Start parent	☐Yes ☐No			

EMPLOYMENT HISTORY: List below your paid work experience, starting with your present or most recent job. Include self-employment. <u>Be complete and specific</u>. Your application must show you meet qualifications in order to receive an interview. <u>Attach additional pages if necessary in order to include all relevant jobs.</u>

Employer:

Complete Address:

Supervisor:	Phone #:	
Your Title:	Employed To:	Hours/
Starting Salary: Ending:	From: Month/Year Month/Year	Week
Specific Duties:	•	
Reason for Leaving:		
Employer:		
Complete Address:		
Supervisor:	Phone #:	
Your Title:	Employed To:	Hours/
Starting Salary: Ending:	Employed To: From: Month/Year Month/Year	Week
Specific Duties:		
Reason for Leaving:		
Employer:		
Complete Address:		
Supervisor:	Phone #:	
Your Title:		Hours/
Starting Salary: Ending:	Employed To: From: Month/Year Month/Year	Week
Specific Duties:		
Reason for Leaving:		

REFERENCES:

Please provide one personal and one professional reference.

		NAME		PHONE NUMBER		
Personal Reference						
Professional Reference						
EDUCATION:						
Have you graduated from I	high school o	r received a	a G.E.D.?	□Yes		lo
Colleges or other schools attended:						
Name & Location	Dates Attended	Credit Hours Earned	Did you Graduate	List degr Major, Mi		Major courses taken

SPECIALIZED SKILLS OR TRAINING: List any skills, abilities or training that relate to the job for which you are applying. Examples: computer programs, languages, music, first aid, CPR, counseling, CDL, bus driver license.

VOLUNTEER AND <u>UNPAID</u> WORK EXPERIENCES: List experience related to the job for which you are applying such as involvement with pre-school, day care, Head Start, grade school, 4-H, Scouts, hot lines, agency-related committees, etc. List types of work including length (Example: Volunteered at child's pre-school 3 hrs a week for nine months in 2000-2001 – helped with . . . [specific details].). Please include reference contact information. This section can be used to help you meet qualifications. <u>Be complete and specific</u>.

EXPLANATION AND ADDITIONAL INFORMATION: Use the space below for	or any additional
information or comments relative to your interest in working for this program.	Attach additional
sheets if more space is needed.	

EMPLOYMENT INFORMATION - READ CAREFULLY:

- Employees or other persons who are subject individuals must be enrolled in the State of Oregon Child Care Division's Central Background Registry. Employment is subject to fingerprinting and criminal records and child protective services records check as required by Oregon Revised Statutes (ORS 181.537).
- ♦ All prospective employees are subject to drug and alcohol testing.
- Falsifying information on this job application constitutes grounds for not hiring or for termination.
- Kids & Company cannot be responsible for any interviewing or moving expenses incurred by the applicant and or new employee.
- All applications for advertised positions will be reviewed and screened by the hiring committee. Applicants considered for hiring will be notified of interviewing date, time and location.
- Neither Kids & Company nor any of its programs shall discriminate in its hiring and personnel procedures against any applicant on the basis of race, color, sex, age, marital status, religion, handicap or national origin.
- The USDA and the State of Oregon are equal opportunity providers and employers.
- Present or past employers will/may be contacted about your performance and qualifications.

I agree to the terms and conditions of employment from above and my signature indicates my understanding and agreement.

Signature of Applicant Date

Applications may be returned or mailed to: Kidco Head Start

300 Market St., Suite 200 Lebanon, OR 97355

Declaration Form for Prospective Employees in Head Start Programs

For use by Head Start Agencies to comply with 45 CFR Part Personnel Policies, Section 1301.31 (c) and (d).	: 1301, Subpart D, Head Start Grants Administration,
Name of Prospective Employee:	
Federal policies now require that Head Start agencies requir prior to employment which lists:	re all prospective employees to sign a declaration
(1) All pending and prior criminal arrests and charges related	d to child sexual abuse and their disposition;
(2) Convictions related to other forms of child abuse and neg	glect; and
(3) All convictions of violent felonies.	
The declarations may exclude:	
Any offense, other than any offense related to chefelonies committed before the prospective emploa juvenile court or under a youth offender law;	ild abuse and/or child sexual abuse or violent yee's 18th birthday, which was finally adjudicated in
Any conviction for which the record has been exp	ounged under Federal or State law; and
Any conviction set aside under the Federal Youth	Corrections Act or similar State authority.
Note that individuals who declare, through this form, that the any of the offenses listed above are not automatically disquareview each case to assess the relevance of an arrest, charge	alified from being hired. Head Start agencies must
Please provide your signature on the appropriate category be	elow:
I <u>have not been</u> arrested, charged and/or convicted on one	or more of the three types of offenses listed above.
Signature	Date
I <u>have been</u> arrested, charged and/or convicted on one or m	nore of the three types of offenses listed above.
If so, please attach information listing the offense(s), the date other relevant information.	e(s) of the arrest, charge, and/or conviction, and
Signature	Date

IMPORTANT: Each Head Start agency must take necessary steps to assure the confidentiality of this form.