



Application for Employment

TLC does not engage in unlawful employment discrimination because of race, creed, color, age, sex, national origin, disability or other characteristic protected by law. Employment with TLC is of indefinite duration, terminable at the will of either party with or without cause.

Personal

Last Name	First	MI	Date
Street Address			Home Telephone ()
City, State, Zip			Business Telephone ()
Have you ever applied for a position with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year			
Position Desired			Salary requested
When are you available to work? <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday Hours:			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 18 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Applicants under 18 must provide proof of authorization to work in position.</i> Answer below <i>ONLY</i> if applying for <u>{LIST POSITIONS}</u> Are you 21 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you worked for TLC before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?
Employment with Trumbull Loves Children, Inc. requires proof of eligibility for employment in the United States.			
How did you hear about TLC?			

I _____, residing at the address provided on page one,

do hereby authorize any local police department to release to Trumbull Loves Children, Inc., a before and after school child care program, any criminal and motor vehicle information, which may be on file on me. I also authorize each educational institution and employer identified above to release to Trumbull Loves Children, Inc. for a period of six months following the date of my signature below, any information the organization maintains about me. Furthermore, I release all such police departments, educational institutions, employers and Trumbull Loves Children, Inc. from all liability for damage as a result of divulging this information.

Signature

Date

<u>EMERGENCY CONTACT</u> (Please list persons who are available during day time hours)	<u>RELATIONSHIP</u>	<u>TELEPHONE NUMBERS</u> (List a minimum of two numbers per person)
1.		
2.		

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION
(Please read carefully):

I understand that this application is not and is not intended to be a contract of employment nor does this application obligate Trumbull Loves Children, Inc. to me in any way. I understand and agree that unless specified otherwise in a writing naming me and signed by the President of the Board of Directors of Trumbull Loves Children, Inc., Employment with Trumbull Loves Children, Inc. is-at-will, that is, it can be terminated by either party with or without notice, at any time with or without cause. I hereby authorize TLC to contact references or my personal, education, and/or employment history.

By signing, I acknowledge that I have read, understood, and agree to the above statements.

Applicant's Name

Date

Please return completed application to:

Trumbull Loves Children, Inc.
Attn: Chauna Gordon, Human Resources
P.O. Box 162
Trumbull, CT 06611