



9729 Seahawk Road  
Berlin, Maryland 21811  
410-603-4224  
Carrie@CoastalEarlyLearning.com

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Please circle your preference: Full-time Part-time AM PM Full-Day

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO  
☐ ☐ ☐ ☐

Have you ever worked for this company? YES NO If yes, when? \_\_\_\_\_  
☐ ☐

Have you ever been convicted of a felony? YES NO  
☐ ☐

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Diploma: \_\_\_\_\_  
☐ ☐

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_  
☐ ☐

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_  
☐ ☐

Please attach a copy of any degree, transcripts, certifications, etc. that you may have.

## Maryland Child Care Credentials and Certifications

**45 Hour Course:** ☐ Infant/Toddler ☐ School Age ☐ School Age Director

**90 Hour Course:** ☐ Infant/Toddler ☐ Preschool ☐ School Age

**Other:** ☐ ADA Compliant ☐ Medication Administration ☐ Current First Aid

☐ Current CPR ☐ MSDE Developmental Progress ☐ MSDE approved training in Supporting Breastfeeding Practices

**Do you have Montessori Credentials?** YES NO  
☐ ☐

**Montessori Teacher Education Programs?** \_\_\_\_\_

☐ Infant/Toddler ☐ Early Childhood Education ☐ Early Elementary

☐ Upper Elementary ☐ Middle School ☐ High School

## Response Questions

*Are you familiar with the Montessori style of education?*

*If yes, why do you like this approach to teaching?*

*Would you consider taking the classes to become Montessori certified?*

*Do you have any special skills, interests or hobbies that you might share to enhance our program? (Foreign language, musical skills, crocheting, gardening, cooking, crafting, sign language, yoga, etc.)*

## References

*Please list two professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_