EMPLOYMENT APPLICATION

Please complete the entire application.

1.   Employer Information

Employer: Little S.T.E.M.'s LLC
Address: _____
City/State/ZIP: Saint Ann, Missouri 63074
Telephone: 314-368-8827

It is the policy of Little S.T.E.M.'s LLC to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

2.   Applicant Information

Applicant Full Name: _____
Home Address: _____
City/State/ZIP: _____
Number of years at this address: _____
Daytime phone: _____   Evening phone: _____
Mobile phone: _____
Social Security Number: _____
Driver's License (State/Number):   _____

3.   Emergency Contact

Who should be contacted if you are involved in an emergency?
Contact Name: _____
Relationship to you: _____
Address: _____
City/State/ZIP: _____
Daytime phone: _____   Evening phone: _____

4.   Job Position Applied For:2-3 year old Classroom Teacher

5.   Are you at least 18 years old?   _____ Yes   _____ No

6.   Are you willing to work any shift, including nights and weekends? _____ Yes _____ No
      If no, please state any limitations:
      _____

7.   If applicable, are you available to work overtime? _____ Yes _____ No

8.   If you are offered employment, when would you be available to begin work?
      _____

9.   If hired, are you able to submit proof that you are legally eligible for
      employment in the United States? _____ Yes   _____ No

10.   Are you able to perform the essential functions of the job position you seek with
      or without reasonable accommodation?   _____ Yes   _____ No

      What reasonable accommodation, if any, would you request?
      _____

11.   Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are
seeking. Enter the number of years of experience, and circle the number which corresponds to
your ability for each particular skill. (One represents poor ability, while five represents exceptional
ability.)

Skill		Years of Experience	Ability or Rating
[ ]	Microsoft Office Suite (Word, Excel, etc.)	_____	1 2 3 4 5
[ ]	Answering telephones	_____	1 2 3 4 5
[ ]	Filing	_____	1 2 3 4 5
[ ]	Customer service	_____	1 2 3 4 5
[ ]	Lesson Planning	_____	1 2 3 4 5
[ ]	Parental Communication	_____	1 2 3 4 5
_____		_____	1 2 3 4 5
_____		_____	1 2 3 4 5

12.   Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

13.   Applicant's Education and Training

College/University Name and Address

_____

Did you receive a degree? _____ Yes   _____ No   If yes, degree(s) received:

_____

High School/GED Name and Address

_____

Did you receive a degree? _____ Yes   _____ No

Other Training (graduate, technical, vocational):

_____

Please indicate any current professional licenses or certifications that you hold:

_____

Awards, Honors, Special Achievements:

_____

14.   References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

15.   Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

        _____
        _____

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Little S.T.E.M.'s LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

_____   _____

APPLICANT SIGNATURE   DATE