



**CORVALLIS COMMUNITY CHILDREN'S CENTERS**

3285 NE Oxford Cir  
Corvallis, OR 97330  
541-753-0191

*CCCC is a non-profit child care organization, providing quality child care for families in the Corvallis community since 1968. CCCC is an Equal Opportunity Employer.*

**APPLICATION FOR EMPLOYMENT**

**Personal Information**

NAME \_\_\_\_\_  
Last First MI Other Names Used

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip

PERMANENT ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**Employment Desired**

POSITION DESIRED \_\_\_\_\_ DATE AVAILABLE \_\_\_\_\_

NAMES AND RELATIONSHIP OF ANY FRIENDS/ RELATIVES WORKING FOR CCCC: \_\_\_\_\_

HOW WERE YOU REFERRED TO CCCC? \_\_\_\_\_

EXPERIENCE OR SPECIAL TRAINING IN EDUCATION, CHILD CARE, OR OTHER RELATED TOPICS

**Education**

	Name and location of school	Subjects Studied	Graduated?
HIGH SCHOOL	_____	_____	Y N
COLLEGE	_____	_____	Y N
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL	_____	_____	Y N

**Employment History**

(PLEASE LIST LAST THREE EMPLOYERS, STARTING WITH MOST RECENT)

Date (Mo/Yr)	Employer's Name and Address	Supervisor's Name and Phone	Position Held	Salary	Reason for Leaving
FROM					
TO					
FROM					
TO					
FROM					
TO					

IF YOU ARE CURRENTLY EMPLOYED, MAY WE CONTACT YOUR CURRENT EMPLOYER? \_\_\_\_\_

**References**

(LIST THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM HAVE KNOWN YOU FOR AT LEAST ONE YEAR)

Name, Email Address	Phone Number	Business/personal	Years Known
1			
2			
3			

THIS JOB REQUIRES THAT YOU HAVE A BACKGROUND CHECK AND BE REGISTERED IN THE CRIMINAL HISTORY REGISTRY THROUGH THE STATE OF OREGON CHILD CARE DIVISION. DO YOU HAVE A CURRENT "R" NUMBER? IF SO, WHAT IS IT? \_\_\_\_\_ ASK US FOR INFORMATION IF YOU DON'T HAVE AN "R" NUMBER. THIS JOB ALSO REQUIRES FIRST AID/CPR AND FOOD HANDLER TRAININGS, AND OTHER REQUIRED TRAININGS. CLASS INFORMATION IS AVAILABLE.

By signing below, I affirm that the information and statements provided in the application are true and accurate to the best of my knowledge, and hereby authorize CCCC to contact employers and references listed in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, be terminated at any time without any previous notice.

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