



APPLICATION FOR EMPLOYMENT

Revised 2025

FIRST NAME: _____ MIDDLE NAME: _____ LAST: _____

HOME ADDRESS: _____ CITY: _____ ZIP: _____

PHONE NUMBER: () _____ - _____ EMAIL: _____

SOCIAL SECURITY NUMBER: _____ - _____ (I DO NOT HAVE A SS#) ☐

DATE OF BIRTH: ____/____/____

If you are under the age of 18, can you submit a work permit if hired (YES/NO)

If you are not a United States citizen, do you have a VISA to work in the United States? (YES/NO)

If yes, what kind of classification do you have? Explain: _____

Please provide your VISA Number: _____ and Expiration Date: _____

Has a bond or security clearance ever been denied and/or canceled? (YES/NO) If yes, please explain: _____

Have you been convicted of any crimes or currently have any pending legal proceedings or have a criminal history to include credible evidence e.g., a court order or jury, a department investigation, or other reliable evidence to have abused, neglected, or deprived a child or adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct to include family violence? (YES/ NO) If yes, please explain:

Under the Americans with Disability Act of 1991, A Brighter Day Early Learning Academy, Inc. is required to reasonably accommodate individuals with disability. The reasonable accommodation requirement applies to the application process, any employment testing, interviews, and actual employment, provided that the program supervisor is made aware of the accommodation requirement during the interview process and on the initial application. If you are disabled and require accommodations, you are required to inform the program's Director or hiring manager



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during the interview, as this may impact your ability to perform the job duties for which you **are applying.**

List position of interest: _____

Have you read the job description for the position for which you are applying? Are you in all respects able to adequately perform the duties as described? Please see the job descriptions attached to the application. (YES/NO) If there are any accommodations needed, please list them. _____

Do you have a valid driver's license or State-issued Identification? (YES/NO) If yes, please provide the license number and class of license.

_____/_____. If you have only a state-issued identification, please provide the number: _____.

Have you attended/completed any childcare training facilitated by a State of Georgia-approved Trainer, a 2nd party, or any DECAL platform? (YES/NO) If yes, please list them. _____

Do you currently have a high school diploma? (YES/NO)

List learning institutions below:

Elementary/ Middle School	High School- Was the Diploma received? (YES/NO)	College, Trade School, Technical College Was a Diploma, Degree, or Certification Received?
School: _____ _____ _____ _____	School: _____ _____ _____ _____	School: _____ _____ _____ _____
Year _____ to _____	Year _____ to _____	Year _____ to _____



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List any additional schools/programs

here: _____

Have you completed any ECE college courses? (YES/NO)

What is the highest level of education you have completed?

Do you currently hold a Child Development Associate (CDA)? (YES/NO)

Do you currently hold an Associate, Bachelor's, or Master's degree? (YES/NO) If, yes please list the degree below and attach transcripts and certifications to the application.

The Georgia Department of Early Care and Learning (DECAL) requires annual childcare training, are you willing to participate? (YES/NO) A Brighter Day requires all teachers to maintain 18 hours of training each fiscal year, are you willing to maintain training by completing training through either of the following: State approved trainer, Pro solutions, or Georgia Professional Registry account? (YES/NO)

OPEN Questionnaire:

1. Do you have at least one year's experience working with children in a childcare setting? (YES/NO) If yes, please explain the experience.

2. Have you in the past worked with children with disabilities? (YES/NO)
3. Do you currently have a CPR First Aid certification? (YES/NO) If yes, please provide the training issuance date and the expiration date: _____ to _____.
4. Are you able to manage a classroom with 10 to 15 children? (YES/NO)



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5. Are you able to manage a classroom with at least 6 infants? (YES/NO)?
6. Are you able to manage a classroom with at least 10 two-year-olds? (YES/NO)
7. Are you able to provide adequate supervision, never leaving children unattended? (YES/NO)

Experience with Children:

Indicate the ages of your children, your duties of the time you were employed or worked in this position, and your reason for leaving.

Experience in Administration Role(s)

Emergency Contact Information:

Name:	Name:
Relationship:	Relationship:
Phone Number:	Phone Number:



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References: 2 personal and 2 professional references required. (Professional reference should include a previous manager or ***Program Director***, Professor, or Teacher, Mentor)(Personal reference may include Co-Teacher, Relative, or close colleague.)

Personal reference Contact Name: _____	Professional Reference Contact Name: _____
Personal Reference Contact Phone Number & Email. () _____ Email: _____	Professional Reference Contact Phone Number & Email. () _____ Email: _____

Personal reference Contact Name: _____	Professional Reference Contact Name: _____
Personal Reference Contact Phone Number & Email. () _____ Email: _____	Professional Reference Contact Phone Number & Email. () _____ Email: _____

By signing, I certify that all information on this application is true and correct. I have not given any false information or statements concerning my qualifying requirements.

Signature: _____ Date: _____



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Hired: (Yes/No)

Application approved under condition (Yes/No) If yes, what conditions:

Was Fingerprint Clearance Complete before the starting date? (Yes/No)

Comments: