



# SPRINGFIELD MONTESSORI SCHOOL

## APPLICATION FOR EMPLOYMENT

### ***Personal***

Last Name First Middle Telephone - Home

Street Address/Apartment Number Social Security Number Telephone - Work

City / State / Zip Code

E-mail Address

### ***Position***

☐ Full Time ☐ Part Time ☐ Student Intern

### ***Referral Source***

☐ Employee ☐ Advertisement ☐ Agency ☐ Friend ☐ Walk-in ☐ Relative ☐

Name of referral source

### ***General Information***

Yes No

☐ ☐ Are you legally authorized to work in the United States?

☐ ☐ Will you now or in the future require sponsorship for employment visa status?

☐ ☐ Are you under 18 years of age? If yes, can you provide proof of eligibility to work?

### ***Education***

Number of Yrs.  
Completed.

Did you  
graduate

Name of School

City and State

High School

Community College

University

Graduate School

5100 Brannigan Street, Dublin, Ca 94568  
Phone: 925.828.5102 Fax: 925.828.5108  
E-mail: dublinadmin@springfieldmontessori.com  
Website: www.springfieldmontessori.com



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## *Employment Experience*

Employer		Dates of Employment From: _____ To: _____	
Address (Street Number and Name, City, State, and Zip Code)		Hourly/Monthly rate: Start: _____ Final: _____	
Your Title	Supervisor's Name / Title Telephone		
Job Description			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

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Employer		Dates of Employment From: _____ To: _____	
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Employer		Dates of Employment From: _____ To: _____	
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Your Title	Supervisor's Name / Title Telephone		
Job Description			
Reason for Leaving			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

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<b>References</b>		<i>Please provide the names of three references. If possible, please include one past supervisor</i>	
Name	Position	Phone Number	Years Known

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I give the Employer the right to investigate all references and to secure additional information about me, if job- related. Furthermore, I give the Employer the right to verify any educational reference given in this application. I hereby release from liability the Employer and its representatives for seeking such information and all other corporations, educational institutions, or organizations for furnishing such information. \_\_\_\_\_ **Initial here**

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. \_\_\_\_\_ **Initial here.**

In the event of my employment by the Company, I agree to abide by all present and subsequently issued rules of the Company. \_\_\_\_\_ **Initial here**

I understand that just as I am free to resign at anytime, the Employer reserves the right to terminate my employment at any time, with or without cause, and without prior notice. \_\_\_\_\_ **Initial here**

**Signature of Applicant:** \_\_\_\_\_

**Date**