



THE FUTURE GROWS HERE.

Sherman County Sprouts, Inc.

PO Box 428 – Loup City, NE 68853
 120 North 6th Street – Loup City, NE 68853
 (308) 745-5040
 info@scedinc.org
www.shermancountysprouts.infocampaign.org/

APPLICATION FOR EMPLOYMENT

Sherman County Sprouts, Inc. is a non-profit Early Childhood Development Center that assures equal employment opportunities to applicants and employees in all aspects of human resource administration without regard to race, color, religion, national origin, age, sex, sexual orientation, marital status, disability, or veteran status.

PERSONAL INFORMATION (Please use name on Social Security Card)

Last	First	MI	Email	
Mailing Address		City	State	Zip
Cell Phone	May we text you? <input type="checkbox"/> Yes <input type="checkbox"/> No		Alternate Phone	
What position are you applying for?			Type of Work Desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	

ADDITIONAL INFORMATION

Best time to contact you is :..... AM or PM

What is your minimum salary requirement? \$

Are you 18 years of age or older? Yes No

Are you currently employed? Yes No

Do you have a current driver's license? Yes No

If Yes, what state is it from? _____

If selected for employment are you willing to submit to a background check and fingerprinting? Yes No

Are you legally able to work in the United States? Yes No

ADDITIONAL INFORMATION

Types of computers, software, and other equipment you are experienced with operating:

Professional licenses, certifications, or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation that you wish to bring to Sherman County Sprouts, Inc.'s attention:

EDUCATION

Please list education or specialized experience, which relates to the position(s) for which you are applying. You may exclude names or terms, which indicate, for example, race, color, religions, sex, disability, or national origin.

	School Name & Location	Years Completed	Diplomas/Degrees	Course of Study
High School		9 10 11 12		
University/College		1 2 3 4		
Graduate School		1 2 3 4		
Are you planning to further your education? Yes or No If Yes, when?				
Military Service		Dates of Active Duty:		Branch of Service

EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here. No more than 10 years history recommended.

Employer Name & Address: Full Time or Part Time Pay: \$ _____ Per: _____	Position title/duties, skills: Supervisor: Phone:	Start Date: End Date: Reason for Leaving: May we contact? Yes No
Employer Name & Address: Full Time or Part Time Pay: \$ _____ Per: _____	Position title/duties, skills: Supervisor: Phone:	Start Date: End Date: Reason for Leaving: May we contact? Yes No
Employer Name & Address: Full Time or Part Time Pay: \$ _____ Per: _____	Position title/duties, skills: Supervisor: Phone:	Start Date: End Date: Reason for Leaving: May we contact? Yes No

REFERENCES

List three references who are not relatives or former supervisors.

1) Name: _____ Address: _____
 Phone: _____ Email: _____ Occupation: _____ Years Known: _____

2) Name: _____ Address: _____
 Phone: _____ Email: _____ Occupation: _____ Years Known: _____

3) Name: _____ Address: _____
 Phone: _____ Email: _____ Occupation: _____ Years Known: _____

Please Read Before Signing:

By signing, I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I am aware that should investigation at any time disclose any such misrepresentation or falsification my application will be rejected, I will be dismissed from service, and I will be disqualified from applying in the future for any position under the jurisdiction of Sherman County Sprouts. I understand if I am extended an offer of employment, it may be conditioned upon my successfully passing a background check and fingerprinting.

Signature

Date

Send Completed Application and Any Supporting Documents To:

Email: info@scedinc.org

or

Sherman County Sprouts
Attn: Melissa Dush
PO Box 428
Loup City, NE 68853