

SUM Child Development, Inc.
Application for Employment

Central Office
14 South 11th St., Mifflinburg, PA 17844
570.966.2845
www.sumcd.org

Snyder, Union, Mifflin Child Development, Inc. will provide reasonable accommodations for qualified individuals with disabilities. Additionally, an applicant with a disability who needs an accommodation during the application or interviewing process should request such an accommodation.

SUM Child Development, Inc. is an equal opportunity employer and does not discriminate based on race, color, religious creed, national origin, sex, age, sexual orientation, veteran status, or disability in which the person is able to perform the essential functions of the position.

POSITION APPLYING FOR _____

NAME _____ **DATE** _____
ADDRESS _____ **TELEPHONE** _____
_____ **E-MAIL** _____

EMPLOYMENT HISTORY

ADDRESS OF EMPLOYER	DATES OF EMPLOYMENT	REASON FOR LEAVING
1. Position:	 SUPERVISOR:	
2. Position:	 SUPERVISOR:	
3. Position:	 SUPERVISOR:	
4. Position:	 SUPERVISOR:	

EDUCATION HISTORY

Highest Level (or grade) of education you have completed? _____

HIGH SCHOOL, COLLEGE OR OTHER

YEARS COMPLETED

COURSE OF STUDY (majors and degrees)

INFORMATION NEEDED FOR EMPLOYMENT CONSIDERATION

1. Do you have a vehicle to use on the job? _____
2. Are you a parent of a child presently served or served in the past by a program of SUM Child Development? _____ If yes, which program?
 _____ Head Start _____ Early Head Start _____ Child Care _____ PEEK
3. Have you ever worked for SUM Child Development before? _____ Yes _____ No
 If yes, answer the following: Positions: _____
 Dates of employment: _____ to _____
4. References: Please list the names of 3 persons familiar with your character, ability, or education for more than 1 year. Do not include friends or relatives.

NAME, ADDRESS, AND PHONE NUMBER

OCCUPATION

PROFESSIONAL RELATIONSHIP TO APPLICANT

1.		
2.		
3.		

Please specify any restrictions regarding contacting your current employer: _____

5. List any other experiences, like volunteer work, not previously listed, which are relevant to the position for which you are applying:

6. Why are you interested in working for SUMCD, Inc?

CONDITION OF APPLICATION FOR EMPLOYMENT AT SUM Child Development Inc. Please read the following statements carefully before signing below. Your signature indicates your acceptance of the terms stated.

I UNDERSTAND THAT:

1. Any false or incomplete information in my application may be reason for denying employment, or if employed, termination from employment.
2. SUM Child Development Inc. has my permission to check out my entire work history by contacting previous employers.
3. My employment may require me to attend evening meetings and out of town and/or overnight meetings.
4. My employment may require me to have a licensed, inspected vehicle for use on the job.
5. SUM Child Development Inc. may request written references from names and addresses supplied on my application.
6. If I am selected for a position, I am aware that by law I must apply for and receive a clearance check from the Pennsylvania State Police, or FBI if I am an out of state resident, at a cost of \$10. Application must be made at time of acceptance of job offer.
7. If I am selected for a position, I am aware that by law I must apply for and receive a clearance check from the Pennsylvania Department of Public Welfare, the child abuse state registry, which lists founded and indicated cases of child abuse at a cost of \$10. Application must be made at time of acceptance of job offer.
8. If I refuse to apply for either one or both of the clearance checks listed in #6 Or #7 above, or refuse to share clearance information with the executive director, I will not be considered for employment at SUM Child Development, Inc.
9. All new employees beginning employment 1/1/86 or later must abide by PA ACT 33, amended by ACT 80, and any future amendments.
10. I understand that in order to carry out the essential functions of this position for administrative positions, I must be able to perform the following physical activities with or without reasonable accommodations: sit, stand, carry 10 lbs., have unrestricted use of upper body, be mobile either naturally or with mechanical assistance, hear within normal ranges, see within normal ranges. Additionally, for all other positions, must be able to stoop, run, walk, bend, lift children, carry 30 lbs., be outside in all seasons, and prepare food.
11. I further understand that this is an application for employment and that no employment contract is being offered.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS.

Signature

Date

FEDERAL POLICIES REQUIRE THAT HEAD START/CHILD CARE AGENCIES REQUIRE ALL PROSPECTIVE EMPLOYEES TO SIGN A DECLARATION PRIOR TO EMPLOYMENT WHICH LISTS:

- All pending and prior criminal arrests and charges related to child sexual abuse and their disposition.
- Convictions related to other forms of child abuse and/or neglect, and
- All convictions of violent felonies.

This declaration shall exclude:

- Any arrest and convictions prior to age 18, except arrests and convictions for child sexual abuse and violent felonies, the latter which must be reported.
- Any convictions for which court records have been expunged.
- Any conviction set aside under the Federal Youth Corrections Act or similar state authority.

STATE LAW, ACT 80, WHICH AMENDED ACT 33, PROHIBITS HIRING ANY INDIVIDUAL WHO HAS EVER BEEN CONVICTED OF ANY OF THE FOLLOWING CRIMES:

Criminal homicide
Aggravated assault
Harassment
Kidnapping
Unlawful restraint
Rape
Statutory rape
Deviate sexual intercourse
Aggravated indecent assault

Indecent assault
Indecent exposure
Concealing death of child born out of wedlock
Endangering welfare of children
Dealing with infant children
Prostitution and related offenses
Obscene and other sexual material
Corruption of minors
Sexual abuse of children

ACT 80 ALSO PROHIBITS HIRING ANY INDIVIDUAL WHO HAS A FOUNDED CASE OF ABUSE LODGED AGAINST THEM ON THE DEPARTMENT OF PUBLIC WELFARE STATE CHILD ABUSE REGISTRY DURING THE LAST 5 YEARS.

If the information above DOES NOT apply to you, that is, you have not been involved in any criminal activity as described AND your name will not be found on the State Child Abuse Registry, please sign the declaration below:

I HAVE NOT BEEN ARRESTED, CHARGED AND/OR CONVICTED ON ONE OR MORE OF THE FEDERAL CRIMINAL SITUATIONS DESCRIBED IN THE FEDERAL POLICY STATEMENT, AND I HAVE NEVER BEEN CONVICTED OF ANY OF THE CRIMES IN THE LAST 5 YEARS LISTED IN ACT 80, AND I AM NOT LISTED ON THE STATE CHILD ABUSE REGISTRY WITH A CASE OF FOUNDED ABUSE IN THE LAST 5 YEARS.

SIGNATURE

DATE

If the information DOES apply to you, please sign the declaration below and complete the following listing the information requested:

I HAVE BEEN ARRESTED, CHARGED AND/OR CONVICTED ON ONE OR MORE OF THE FEDERAL CRIMINAL SITUATIONS DESCRIBED IN THE FEDERAL POLICY STATEMENT, AND/OR I HAVE BEEN CONVICTED OF ONE OR MORE OF THE CRIMES IN THE LAST 5 YEARS LISTED IN ACT 80, AND/OR I AM LISTED ON THE STATE CHILD ABUSE REGISTRY WITH A CASE OF FOUNDED ABUSE IN THE LAST 5 YEARS. CHECK WHICH IS APPLICABLE.

_____ FEDERAL POLICIES _____ ACT 80 CRIMINAL RECORD _____ ACT 80 STATE
REGISTRY

SIGNATURE

DATE

FEDERAL POLICY INFORMATION:

List all pending and prior criminal arrests and charges related to child sexual abuse and their disposition, including convictions related to other forms of child abuse and/or neglect, and all convictions of violent felonies.

ACT 80 INFORMATION:

List convictions of crimes listed in ACT 80, include dates and dispositions.

List the date of the child abuse registry information_____

I UNDERSTAND THAT MY EMPLOYMENT MAY BE TERMINATED IF I HAVE BEEN NAMED AS THE PERPETRATOR OF A FOUNDED REPORT OF CHILD ABUSE LONGER THAN FIVE YEARS AGO OR THE PERPETRATOR OF AN INDICATED REPORT OF CHILD ABUSE.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

SIGNATURE

DATE