**ZAMZAM knowledge ACADEMY**

347 S. Keech Street, Daytona Beach, FL 32114

zamzamacademyfl.weebly.com

**JOB APPLICATION**

***Please Print All Information***

**Date**: \_\_\_/\_\_\_\_/\_\_\_\_

**Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **First Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Middle Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Street:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone Numbers:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Social Security Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position Applied For: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Have you ever held a child care license with the Dept. of Children & Family or been registered to provide child care in your home? Yes\_\_\_ No\_\_\_ If yes, please identify where and when license was held and what type of program the license was for:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Salary or Hourly Rate expected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been employed by us before? Yes \_\_ No\_\_\_

 If Yes, Date:

Are you currently employed? Yes \_\_ No\_\_\_

May we Contact your present employer? Yes \_\_ No\_\_\_

Are you 21 Years or Older? Yes \_\_ No\_\_\_

Are you prevented from lawfully becoming employed in this

country due to Visa or Immigration status? Yes \_\_ No\_\_\_

*(Proof of citizenship or immigration status is required upon employment.)*

You are Available to Work: Full Time \_\_ Part Time \_\_Temporary\_\_

Date you can Begin Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been convicted of a crime within the last seven (7) years? Yes \_\_ No\_\_\_

*(Other than a traffic violation.)*

If Yes, Please Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please Print All Information* Application For Employment

**EDUCATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| **School** | **Credits Earned** | **Major** | **Diploma/Degree** |
| High School: |  |  |  |
| College: |  |  |  |
| Other Education: |  |  |  |

**EMPLOYMENT:**

List below all present and past employment, beginning with your most recent. All times must be accounted for whether employed or not. Attach an additional sheet if necessary.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Addressof Company andType of Business | From(Mo &yr) | To(Mo &yr) | Describe in detail work you didand your title | WeeklyStart Salary orHourlyRate | WeeklyEnd Salaryor HourlyRate | ReasonforLeaving | Name, Title and PhoneNumber of Your Supervisor |
|  |  |  |  |  |  |  |  |
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**PERSONAL REFERENCES:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/ State/ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/ State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/ State/ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application For Employment

APPLICANT’S STATEMENT AND CONDITIONS OF EMPLOYMENT

(Please read carefully before signing.)

*"I understand that an investigative consumer report involving information concerning my character, employment history,*

*general reputation, police record, personal habits, mode of living, credit and indebtedness may be obtained prior to any*

*final offer of employment. Upon timely written request to the personnel department of the company, the nature and scope*

*of the report will be disclosed to me.”*

*“I certify that the answers given by me in this employment application are true, correct and complete. I agree that the*

*company shall not be liable, in any respect, if my employment is terminated because of misstatements or pertinent*

*omissions made by me in this application. Moreover, I understand that all offers of employment are contingent upon*

*passing the company's prescribed physical examination and drug screen.”*

*“I agree, as a condition of my employment (should I be employed by the Company), to submit to a medical examination if*

*requested and based on the position that I accept or urinalysis test if requested and paid for by the company I further*

*agree to the search or examination of myself or personal property while on the company's premises or while conducting*

*its business elsewhere, I also authorize any company, school, police or security personnel, or other person to give any*

*information regarding my employment, habits, ability, or any other characteristics whatsoever, together with any*

*information they have regarding me whether or not it is in their records. I hereby release all physicians, examiners,*

*companies, schools, or other persons from liability for any damages whatsoever for such testing, examining, or issuing*

*this information. It is agreed and understood that completion of this application does not mean a job opening exists and in*

*no way obligates the company to employ me.”*

*“In the event of employment, I will comply with all company rules and regulations as established from time to time*

*including the company's substance abuse policy. I am willing to work all assigned overtime or other special work*

*assignments as requested by the company. Furthermore, since the company does not offer contracts of employment*

*(unless signed by the President), I understand that nothing contained herein is intended to create a contract between the*

*company and me for either employment or the provision of any compensation or benefits. I understand that I have the*

*right to terminate my employment at any time and likewise, the company has the same right.”*

*“I hereby understand and acknowledge that any employment relationship with this Company is of an “At-Will” nature,*

*which means that the Employee may resign at any time and the Employer may discharge Employee at any time, with or*

*without notice, with or without cause. It is further understood that this “At-Will” employment relationship may not be*

*changed by any written document or by verbal agreement unless such change is specifically acknowledged in writing by*

*an authorized Executive of this Company. I also understand that ZamZam Knowledge Academy retains the right to*

*amend, modify, add or delete any or all policies or procedures at its sole and absolute discretion.”*

*“During my employment with ZamZam Knowledge Academy, and after my employment ends, I agree not to disclose any*

*confidential or proprietary information regarding operating and trade secrets. I further agree that with respect to any civil*

*litigation involving ZamZam Knowledge Academy, in which I am a potential witness and which does not involve an*

*actual or potential claim by me personally, I will not discuss the facts of the case with any third parties without first*

*notifying ZamZam Knowledge Academy, or unless a representative or attorney ZamZam Knowledge Academy. is*

*present. A copy of this form may be used as the original. The use of results from this form and/or tests will be used for*

*prudent employment decisions.”*

Applicant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Upon acceptance of a job offer, applicant agrees to read, acknowledge understanding and sign other company documents required prior to official employment with ZamZam Knowledge Academy.