ISLAMIC CENTER OF AMERICA
Masjidu Ahlis Sunnah
215 North Oraton Parkway - Ahlus Sunnah Plaza
East Orange, N.J. 07017 USA
(973) 672-6690
www.thesunnah.org

بِسْمِ اللَّهِ الرَّحْمَٰنِ الرَّحِيمِ

Employment Application

NAME:		BIRTHDATE (IF UNDER 18 YEARS):		
CELLPHONE:	HOME PHONE:	E-MAIL ADDRESS:		
HOME ADDRESS:	CITY:	STATE:	ZIP:	
POSITION(S) APPLIED FOR:		DATE OF APPLICATION:		

EDUCATION AND TRAINING

Education:

High school graduate or General Education Development (GED)? ☐YES ☐NO ☐CURRENTLY ATTENDING

Early Childhood Education Coursework in High School? ☐YES ☐NO ☐CURRENTLY ATTENDING

Post high school training (college, business school, military, etc.): ☐YES ☐NO ☐CURRENTLY ATTENDING

SCHOOL NAME	LOCATION (City/Date)	YEARS ATTENDED	DEGREE RECEIVED	GRADUATION DATE	MAJOR/MINOR

Other Child Care Training:

TITLE OF CONFERENCE/WORKSHOP/TRAINING	CLOCK HOURS	TRAINER/SPONSOR

EMPLOYMENT HISTORY

(Start with current or most recent employer, including volunteer experience. If more space is needed to attach another sheet of paper or your resume.)

MAY WE CONTACT THE EMPLOYER BELOW?		☐YES	☐NO
EMPLOYER:	TITLE/POSITION:	EMPLOYED FROM:	
PHONE:	SUPERVISOR NAME:	EMPLOYED TO:	
JOB DUTIES:		REASON FOR LEAVING:	

MAY WE CONTACT THE EMPLOYER BELOW?		☐YES	☐NO
EMPLOYER:	TITLE/POSITION:	EMPLOYED FROM:	
PHONE:	SUPERVISOR NAME:	EMPLOYED TO:	
JOB DUTIES:		REASON FOR LEAVING:	

MAY WE CONTACT THE EMPLOYER BELOW?		☐YES	☐NO
EMPLOYER:	TITLE/POSITION:	EMPLOYED FROM:	
PHONE:	SUPERVISOR NAME:	EMPLOYED TO:	
JOB DUTIES:		REASON FOR LEAVING:	

Have you ever applied with us before?	☐YES	☐NO	If yes, give date:
Have you previously been employed with us?	☐YES	☐NO	If yes, give date:
If you are under 18 years of age, can you provide proof of eligibility to work?		☐YES	☐NO
Are you currently employed?		☐YES	☐NO
Are you legally authorized to work in the United States? (Proof of eligibility will be required upon hire.)		☐YES	☐NO
Do you have any physical condition that would limit your performance at work?		☐YES	☐NO
What shifts are you available to work:	☐Full Time	☐Part Time	☐Temporary
Are you currently on "lay-off" status and subject to recall?		☐YES	☐NO
Have you been convicted of a felony within the last seven (7) years? (A conviction will not necessarily disqualify an applicant from employment)		☐YES	☐NO
If Yes, please explain:			

REFERENCES

Please provide information for at least two people who have knowledge of your work experience, education, and suitability to work with children.

NAME/TITLE:	ADDRESS:	**FOR CENTER USE ONLY**	
RELATIONSHIP:		DATE REFERENCE RECEIVED:	
PHONE:		☐WRITTEN	☒VERBAL
NAME/TITLE:	ADDRESS:	**FOR CENTER USE ONLY**	
RELATIONSHIP:		DATE REFERENCE RECEIVED:	
PHONE:		☐WRITTEN	☐VERBAL
NAME/TITLE:	ADDRESS:	**FOR CENTER USE ONLY**	
RELATIONSHIP:		DATE REFERENCE RECEIVED:	
PHONE:		☐WRITTEN	☐VERBAL

RECEIPT OF POLICIES AND PROCEDURES

I attest that all the information on this application is accurate, and that I have read and received the following information:

☐	Center Policies and Procedures
☐	OOL Information to Parents Document
☐	Discipline Policy
☐	Policy On The Release Of Children
☐	Policy On The Use Of Technology And Social Media
☐	Policy on the Methods of Parental Notification of Injuries (if applicable)
☐	I have received a Child Abuse Record Information (CARI) form and consented to a CARI check
☐	I have received a Criminal History Record Information (CHRI) form and consented to a CHRI check.
☐	Other:

STAFF SIGNATURE:		DATE:	

FOR CENTER USE ONLY

DATE HIRED:	POSITION:	SOCIAL SECURITY #:	DATE TERMINATED:
DATE OF PHYSICAL:	RESULTS:	DATE OF MANTOUX/CHEST X-RAY:	RESULTS:
OTHER:			