1227 Park Avenue
Bismarck, ND 58501
701-258-5437
www.SKJrA.com

Super Kids Jr. Academy a Division of Super Kids of America Inc. applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

Position applied for: _____ Agency or Referral: _____

Job Service Referral? ☐ Yes ☐ No

**Full Legal Name: _____ _____ _____
First Middle Int. Last

** (Note: Completion of *Full legal name* is optional.)
(Failure to submit Social Security number on this form will not prohibit employment consideration.Social security number may be required on other forms prior to employment.)

Social Security No: _____ Cell Phone #: _____

Email Address: _____ Home Phone #: _____

Address: _____ Business Phone #: _____

_____ _____ _____
City State Zip Code

Education:

Year Completed: _____

Check Highest Grade Completed: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12

If you did not complete high school, do you have a high school equivalency diploma? ☐ Yes ☐ No Date Received: _____

Check the number of years of post high school education: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7

Name and Location of Institution	Hrs	Degree Received	Major or Concentration	Minor	Dates Attended

If you expect to complete an educational program in the near future, please indicate what type of degree or program and expected completion date. Type of Degree: _____ Completion Date: _____

Experience:

Use additional sheets for additional space. Starting with the most recent, describe ALL paid, military and applicable voluntary experience.
Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position.
You may list significantly different jobs within the same organization as separate items.

May we contact your present supervisor(s)? ☐ Yes ☐ No IMPORTANT! Please check here if you are attaching a resume. ☐ Yes ☐ No

Title: _____ Duties:

Employer: _____ 1. _____

Address: _____ 2. _____

_____ 3. _____

Phone: _____ 4. _____

Type of Business: _____ 5. _____

Immediate Supervisor: _____ 6. _____

Title: _____ Did you manage employees? ☐ Yes ☐ No If Yes, how many? _____

Salary (start): _____ Salary (finish): _____ Equipment Used: _____

Dates (mm/yy) _____ To (mm/yy): _____ Reason for Leaving: _____

☐ Full-Time ☐ Part-Time Hours/week: _____ Your name if different than present: _____

Title: Duties:

Employer: 1.

Address: 2.

3.

Phone: 4.

Type of Business: 5.

Immediate Supervisor: 6.

Title: Did you manage employees? ☐ Yes ☐ No If Yes, how many?

Salary (start): Salary (finish): Equipment Used:

Dates (mm/yy) To (mm/yy): Reason for Leaving:

☐ Full-Time ☐ Part-Time Hours/week: Your name if different than present:

Title: Duties:

Employer: 1.

Address: 2.

3.

Phone: 4.

Type of Business: 5.

Immediate Supervisor: 6.

Title: Did you manage employees? ☐ Yes ☐ No If Yes, how many?

Salary (start): Salary (finish): Equipment Used:

Dates (mm/yy) To (mm/yy): Reason for Leaving:

☐ Full-Time ☐ Part-Time Hours/week: Your name if different than present:

Use this space for any additional information you think you would help us evaluate your application. Include training, seminars, workshops, and special achievements or specialized skills:

Automated word processing {specify software}

Typing speed: Words per Min: Shorthand speed: Good handwriting skills? ☐ Yes ☐ No

License, certificate or other authorization to practice a trade or profession.

License Type (i.e. driver's License)	License Number	Granted by (State of Licensing Board)

References:

List names, addresses and relationships of three people not related to you who know your qualifications. (Include Only If Not Listed on Resme)

Name	Address	Phone	Relationship

Super Kids Jr. Academy Proprietary

Miscellaneous:

Check which shift(s) you would accept: ☐ Day ☐ Evening Specify hours wanted: _____ to _____ Total hours: _____

Check which job status you would accept: ☐ Full-Time ☐ Part-Time ☐ No Benefits Specify other: _____

Check which employment status you would accept: ☐ Salaried ☐ Hourly ☐ Part-time (No benefites)

Are you willing to accept employment, which requires you to travel? ☐ Yes ☐ No

If yes, ☐ During the day only ☐ Occasionally overnight ☐ Frequently overnight

List the geographic location in which you are willing to work. If anywhere write "all": _____

For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States?

☐ Yes ☐ No Under the Immigration Reform and control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verify your identity.

Further, you will be required to provide documentation to that effect should you be employed.

Are you willing to provide your own transportation if necessary for your employment? ☐ Yes ☐ No

Section 2.1-32 of the Code prohibits any board, department or agency, of Super Kids of America Inc. from employing a person who is required to present himself and submit to the Federal Selective Service registration requirement and failed to do so. If you are/were required to register for the Selective Service, have you done so? ☐ Yes ☐ No

If no, state reason: _____

For purposes of compliance with Section 2.1-112 of the Code of Virginia, are you a veteran who received an honorable discharge and served more than 180 consecutive days of full-time active duty in the US Army, Navy, Air Force, Marines, or reserve components thereof, including the National Guard? ☐ Yes ☐ No

Have you ever been convicted* for any violation(s) of law, including major traffic violations in the last two years?

☐ Yes ☐ No If Yes, please provide the following:

Description of offense: _____

Date of charge: _____

County, City, State of Conviction: _____

* Convictions do not need to include juvenile adjudications if you were under age eighteen (18) when charged.

When would you be available to start work? (Day-Month-Year) _____

Certification

I hereby certify that all entries and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment with Super Kids Jr. Academy a division of Super Kids of America Inc. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize Super Kids of America Inc. to rely upon and use, as it sees fit, any information received from such contacts. Information contained on this application may be disseminated to other agencies, nongovernmental organizations or systems on a need-to-know basis for good cause shown as determined by Super Kids of America Inc.

If this application is being submitted electronically, I understand that the use of my typed name on this application has the same legal effect as my original manually affixed signature being submitted.

Signature: _____ Date: _____

Please return Application and attached Release Form to our office for proper processing.

Please Remember to Sign and Date, Thank you!

Super Kids Jr. Academy Employment Policies and Release Form:

There are a number of Super Kids of America Inc. policies that an applicant needs to know about and agree to before being employed. There also are a number of activities that Super Kids of America Inc. may want to instigate as part of the review and investigation of the appropriate background information on an applicant. The purpose of this document is to present these policies and investigative activities to the applicant to ensure that they are understood and agreed to at the time the application is submitted.

We, therefore, ask that you please read, complete, and sign this form before you complete the Application for Employment.

Among the policies that have been adopted at Super Kids of America Inc. are the following that we believe are important for an applicant to know in advance of employment. These are listed below. Your signature on this Release Form indicates that you have read, understand, and would agree to operate under these policies if employed at Super Kids Jr. Academy a division of Super Kids of America.

Policy

1. This firm is an equal employment opportunity employer and does not discriminate because of age, sex, race, color, national origin, disability, or religious preference.
2. Super Kids of America. is a drug and alcohol free-workplace. To ensure worker safety and integrity of the workplace, Super Kids of America. prohibits the illegal manufacture, possession, distribution or use of controlled substances or alcohol in the workplace by its employees or those who engage or seek to engage in business with Super Kids of America. Offers of employment, therefore, may be conditioned on a physical examination, including a drug and alcohol screening.
3. Smoking is not permitted inside the building of Super Kids of America. For the safety and health of its employees, Super Kids of America. is committed to a smoke-free building except for designated areas.
4. Your signature on this Release Form indicates that you understand and agree that if employed, that employment is for no definite period, and may, regardless of the date of payment of your wages and salary, be terminated at any time without previous notice
5. An offer of employment must originate only from the department manager of Super Kids of America.

Background Review Activities

Super Kids of America Inc. may conduct the following investigative activities as part of the background review of prospective employees. Your signature on this Release Form indicates you understand these activities and you authorize them to be performed with the conditions specified as listed below.

1. Persons convicted of specific crimes may not hold certain positions at this company. If you are applying for such a position and have been convicted of a felony, please note this below. If more space is needed, please provide the additional information on a separate sheet of paper. In addition, you authorize Super Kids of America Inc. to undertake a criminal records check with state police officials.
2. You authorize Super Kids of America Inc. to obtain a Motor Vehicle Record report. Our insurance company may also obtain a report through its sources. If the position you are applying for involves driving a motor vehicle, it is imperative that a good driving record exists.
3. You also authorize and request any and all of your former employers to furnish any and all information regarding your job performance. You agree to hold your former employers and their agents harmless from all liability that could relate in any way to the disclosure of private information or an assessment or opinion of your suitability for employment.
4. You understand that an offer of employment must originate from the direct department manager of Super Kids of America Inc.

We ask that you read the remaining three [3] statements and that your signature on this Release Form indicates you understand each.

1. I have read and understand the job description for the position I am applying for above on this date signed below.
2. I understand that misrepresentation or omission of facts herein is cause for termination, if employed.
3. I have read and understand the above application and have answered all portions of the application truthfully and correctly with no omissions.

If this document is being submitted electronically, I understand that the use of my typed name on this document has the same legal effect as my original manually affixed signature being submitted.

Applicant Signature of Release Form: _____ Date: _____

Please return this with your application.

Super Kids of America Inc. Release Form SK-1

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