



6625 Sullins Road, Charlotte, NC 28273

T: (704) 606-9243

www.RoyalChildHome.net

PERSONAL INFORMATION:

Name: _____

Last First Middle

Address: _____

Street City State Zip

Phone: _____

Driver's License: Yes No State Issued:

Have you a car available for work use? Yes No

Do you have the legal right to work in the United States? Yes No

Are you over (18) eighteen years of age? Yes No

EDUCATION: Please complete all sections listed below:

High School _____ Location _____ Graduate Yes No
Degree _____

College or University _____ Location _____ Graduate Yes No
Degree _____

Other – Give Type _____ Location _____ Graduate Yes No
Degree _____

Are you a U.S. war veteran, or have you served in the U.S. Armed Forces? Yes No

EMPLOYMENT DESIRED:

Position Applying For: _____ Location:

Employment Sought: Full-time Part-time Temporary

Salary Desired: Date Available:

Currently Employed: Yes No

May we make inquiries of your current employer? Yes No Past Employer? Yes No



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ADDITIONAL INFORMATION

1. Have you ever been bonded? Yes No If yes, with which employer?

2. Membership in professional/civic organizations:

3. Have you ever been convicted of a felony that is substantially related to the position you are applying for?

Yes No

4. List specialized training, if appropriate, e.g., typing, shorthand, computer or other skills not already indicated:

5. Please list any other pertinent facts you wish to present that may help us evaluate your qualifications for the position you seek:

6. Have you ever been employed by this agency? Yes No If so, when?

7. Have you ever applied to this agency for employment? Yes No If so, when?

EMPLOYMENT/VOLUNTEER EXPERIENCE (Please list 3, beginning with the most recent)

Employer: Position:

Date Employed: from: to: Hours per week:

Salary: starting: final:

Supervisor: Phone:

Brief description of duties:

Employer: Position:

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Employer: Position:



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Date Employed: from: to: Hours per week:

Salary: starting: final:

Supervisor: Phone:

Brief description of duties:

3

REFERENCES: Please list three persons (not related to you) that you have known at least one year:

Name	Title	Years Known
Address		Phone Number
Name	Title	Years Known
Address		Phone Number
Name	Title	Years Known
Address		Phone Number

CONDITIONS OF APPLICATION AND EMPLOYMENT

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal in accordance with Royal child academy company policy. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have and release all parties from all liability for any damage that may result from furnishing information to Royal child academy company. In consideration of my employment, I agree to conform to the rules and regulations of Royal child academy company and my employment and compensation can be terminated, with or without cause by Royal child academy company and/or myself.

SIGNATURE DATE

Royal child academy company is an equal opportunity/affirmative action employer.