



University Community Childcare

2623 Bruner Drive
Ames, IA 50010
(515)294-9838

Registered Nurse employment application

PERSONAL

Name _____ Date _____
 Address _____
 City _____ State _____ Zip Code _____
 email address _____
 Home phone number _____ If hired, can you show proof of age? _____
 Cell phone number _____

EDUCATION

(please attach resume, letters of reference as available, and copy of nursing license)

Name/location of institution	From	To	Diploma/Degree

WORK HISTORY

(start with most recent employer)

Employer _____ **Duties** _____
 Supervisor _____
 Address _____
 Phone number _____
 Kind of business _____
 Your job position _____
 Dates employed _____

May we contact employer to verify information? _____

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Employer	Duties
Supervisor _____	_____
Address _____	_____
Phone number _____	_____
Kind of business _____	_____
Your job position _____	_____
Dates employed _____	_____
May we contact employer to verify information? _____	

Work experiences in public service; please include volunteer work, practicums, etc.

GENERAL

What qualities do you possess that would make you an asset to this program?

Expected rate of pay: _____

Have you ever been discharged or asked to resign from any position? _____

If yes, please explain. _____

Have you ever been convicted of a felony? _____

Work Status: U.S. Citizen _____ Other (please indicate Visa type) _____

Do you have a work permit? _____

Expiration date of current work permit _____

(Must be current to be employed by UCC.)

Please describe any previous work experiences with children.

What you liked; didn't like and why? _____

What are your professional goals in the next 3 to 5 years?

If the information that I have provided you is incorrect or untrue, I understand it may be grounds for denial of application or termination of employment.

Name _____ Date _____

University Community Childcare

I, _____, certify that:

- 1) I do not have any criminal convictions of any law in any state or any record of founded child abuse abuse or dependent abuse.
- 2) I have no communicable disease or health concerns that pose a threat to children.

Reporting Requirements & Procedures for Mandatory Reporters of Child Abuse

The law requires child care providers to report suspected child abuse. It is not the caregiver's role to validate the abuse. The law does not require the reporter to have proof that the abuse occurred before reporting. The law clearly specifies that reports of child abuse must be made when the individual reporting "reasonably believes a child has suffered abuse."

According to Iowa Code section 232.70, if you are a mandatory reporter of child abuse and you suspect a child has been abused, you need to report it to the Dept. of Human Services. Suspected abuse must be reported orally within 24 hours and in writing within in 48 hours to the Dept of Human Services.

To report a suspected case of child abuse:

1. Call your county Dept of Human Services office during regular business hours.
2. Outside of regular business hours, please call 1-800-362-2178.
3. Then follow up by making a written report.

A "Suspected Child Abuse Reporting" form is available from your county Dept of Human Services.

If you suspect sexual abuse of a child under the age of 12 years, you are required by law to make report of child abuse if the abuse resulted from actions or omissions of a non-caretaker. If the child is 12 or older, you may report the abuse, but you are not required by law to do so.

Upon employment you will need to attend Mandatory Reporter's Training.

- 3.) I have been informed of my responsibility as a mandatory child abuse reporter.

Signed _____ Date _____

Reference Check Form

(for applicant to complete)

Please read through the following reference check form. Choose at least 3 references of former employers you are willing to let us contact.

	Name/address	Phone	Occupation
1			
2			
3			

How would your reference or former employer answer the following questions? Please answer the questions the way you think your reference would answer them.

(Choose one reference/former employer)

Reference name _____

Dates in your employment _____

What was your relationship with the applicant? _____

Position held _____

Responsibilities _____

Why did applicant leave your employment? _____

Would you rehire? _____

Please comment about applicant regarding:

Dependability _____

Initiative _____

Ability to work cooperatively in a team situation _____

Ability to receive and act on constructive criticism _____

Ability to communicate effectively with and show respect for staff at the center _____

Ability to maintain confidentiality _____

Ability to behave responsibly when under stress _____

I give my permission for a representative of University Community Childcare to contact former employers and references as listed on my application.

Applicant _____ Date _____

**University Community Childcare
Applicant Survey**

University Community Childcare is committed to the principles of Equal Employment Opportunity and Affirmative Action. To evaluate our EEO/AA program, we must collect information about job applicants. Please share some information about yourself to assist us in doing this. This information is used exclusively for program evaluations and reporting requirements. It will never be connected to you as an individual applicant in any of the pre-employment processes.

Please circle the correct answer.

- A. What sex are you?
1. male
 2. female
- B. What is your age:
1. 18 or younger
 2. 19-29
 3. 30-39
 4. 40-49
 5. 50-59
 6. 60-69
 7. 70 or older
- C. What is the highest level of education you have attained?
1. 0-8 years
 2. 9-12 years, but not a high school graduate
 3. High school graduate or GED?
 4. Post high school vocational or business school training?
 5. Some college, less than BA or BS degree
 6. BA, BS or similar undergraduate degree
 7. MA, MS or similar graduate degree
 8. PhD, or similar professional degree
 9. MD or similar professional degree
- D. Of which racial/ethnic group do you consider yourself a member?
1. White
 2. Black or African American
 3. Native Hawaiian or other Pacific Islander
 4. American Indian or Alaskan Native
 5. Asian
 6. Hispanic or Latino
- E. Do you consider yourself to be physically disabled to the extent that it substantially limits one or more work related activities?
1. No
 2. Yes, vision impaired, not correctable to better than 20/70.
 3. Yes, physically disable, orthopedic: significant impairment or loss of one or both arms or legs, trunk or back or spine.
 4. Yes, hearing impaired, not correctable with a hearing aid.
 5. Yes, physically disabled, non-orthopedic; includes, but is not limited to, stroke, diabetes, arthritis, cerebral palsy, epilepsy, spina bifida, heart disease, muscular dystrophy, multiple sclerosis, or respiratory disease.
 6. Yes, mentally disabled.
 7. Yes, speech impaired.
 8. Yes, substance abuse.
 9. Yes, multiple disabilities.
- F. How did you learn about this job?
1. Job Service of Iowa
 2. State agency
 3. Friend
 4. Newspaper
 5. Other advertisement
 6. Other

Recruitment and Selection Policy

In recruitment and selection of staff members, all equal employment opportunity rules and regulations will be followed.

The Center will actively recruit protected class persons and make every attempt to hire, retain and promote such qualified persons.

The authority to employ staff members is delegated to the Executive Director of the Center. In the event of an opening for the Executive Director, an ad hoc Executive Search Committee shall be established by the Chairperson of the Board of Directors. The procedure for hiring is listed below.

1. All applications received will be kept on file for three months.
2. When a position opens, ads will be placed. All employment advertisements will contain the phrase: "Equal Opportunity/Affirmative Action Employer" when identifying the Center. All recruitment advertisements will be placed in the news media which are non-discriminatory. All advertised vacancies in primary news sources shall also be advertised in sources having significant minority circulation if the primary source has limited minority circulation.
3. Employment applications will be screened based on education and experience.
4. Applicants will be interviewed using a standard set of interview questions. The applicant who is chosen will be contacted by phone. At this point, the applicant will be asked to meet with the Executive Director to answer any questions.
5. All other applicants will be notified by letter. Applicants that are still desirable for positions will be notified that their application will be kept on file.

Equal Opportunity Employment Policy

University Community Childcare affirms its commitment to the Civil Rights Act of 1964 and Amendments of 1972 and the State of Iowa Civil Rights Act of 1965, to insure Equal Opportunity. This commitment will be implemented through a program of Affirmative Action.

The Center's Equal Opportunity Employment Policy is as follows: "No person shall be excluded from employment, discouraged from seeking employment, or their right of services or benefits by the Center on the basis of race, color, creed, national origin, sex, age, religion, physical or mental disability, or political affiliation." Bona fide occupation requirements may involve selective hiring on the basis of sex, age, physical or mental disability.

The policy of non-discrimination for any reason of race, color, creed, national origin, sex, age, religion, physical or mental disability or political affiliation applies specifically to the following areas of concern, though not limited to them:

1. Services to our clients, the manner of providing those services and the continual seeking of means to better serve our clients.
2. Recruitment, selection, assignment and promotion of employees, provisions of benefits to them; consideration to individual conditions of their employment.

All persons involved with selection or management of employees or volunteers, or in aiding or serving clients within the agency will be held accountable for complying with this policy of non-discrimination.

An employee of University Community Childcare, applicant, or client requesting or receiving services who has reason to believe he/she has been discriminated against may file a complaint by submitting a Discrimination Complaint form. For assistance, you may contact a member of the Board of Directors or the Iowa Civil Rights Commission (515)281-3501.