



**Richmond
Montessori
School** *a world of difference*

Richmond Montessori School
499 N. Parham Road
Richmond, Virginia 23229
Phone (804) 741-0040 Fax (804) 741-5341

APPLICATION FOR EMPLOYMENT

Name: _____ Date: _____

Address: _____ * SSN: _____

City, State, Zip: _____ Phone: _____

Daytime Phone: _____ Email: _____

Present Position: _____ Name of Employer: _____

When could you begin? _____ Current Salary: _____

Reason for leaving present position: _____

EDUCATION:

Name and Location of School	Dates of Attendance	Diploma, Degree or Certificate

Branch of the Military? _____ Years/Months: _____ Rank: _____

Any other certificates or credentials? _____

Are you fluent in any foreign languages? _____

PREVIOUS WORK EXPERIENCE:

Name of Employer	Position	Telephone No.	Dates of Employment	Immediate Supervisor

It is the policy of Richmond Montessori School to contact the most recent or present employer. May we contact your current employer at this time? YES [] NO [] If no, please explain: _____

REFERENCES: *Attach any letters of reference you might have.*

Name	Address and Telephone Number	Occupation

**Social Security Number is optional for application, but required for employment purposes*

Please attach an explanation to any "yes" response for the following questions. All employees must be fingerprinted.

1. Have you ever been convicted of a violation of law other than minor traffic offenses? YES [] NO []
2. Have you ever been convicted of any offense involving the sexual molestation, physical, or sexual abuse or rape of a child?
YES [] NO []
3. Are you aware of any physical limitations you may have which would limit your ability to perform the necessary duties of the position for which you are applying?
YES [] NO []

ALL APPLICANTS:

My signature below authorizes Richmond Montessori School to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include information as to criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitations hereby release Richmond Montessori School and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local Sheriff, information from the Central Criminal Records Exchange on either data on all criminal convictions or certification that no data on criminal convictions is maintained, information from the Virginia or other State Department of Social Services Child Protective Services Unit and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand that any omission, falsely answered statement made me by on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed by Richmond Montessori School.

Signature

Date

The electronic signature above and its related fields are treated by Richmond Montessori School as a physical handwritten signature on a paper form.

Richmond Montessori School does not unlawfully discriminate on the basis of age, sex, race, color, religion, disability or national origin in its employment practices or educational programs and activities.