



The Breastfeeding Center
2800 Lincoln Way E
Massillon, OH 44646
330-837-0220
breastfeedingcenter@yahoo.com

APPLICATION FOR EMPLOYMENT

Print application, complete, then mail, email or drop off at The Breastfeeding Center. Email questions, no phone calls please.
 Applications will be accepted through March 10, 2019. All applicants will be contacted by March 24th, 2019.
Thank-you for applying!

PERSONAL:

Name _____
Last First Middle

Address _____
Street City State Zip

Phone (_____) _____ E-mail Address: _____
Area Code

Our hours are Mon-Fri 10-6 & Sat 12-4. What days or times are you not able to work? _____

How many hours per week can you work? _____ How many days? _____ Are you available to work Saturdays? _____

Starting rate desired \$ _____ When can you start? _____

EMPLOYMENT RECORD: List most recent. Please attach an additional page or resume as needed.

Company Name & Address: _____

Position & Duties: _____

Dates of Employment: ___/___/___ to ___/___/___ Reason for Change _____

Supervisor _____ Phone No. (_____) _____

Company Name & Address: _____

Position & Duties: _____

Dates of Employment: ___/___/___ to ___/___/___ Reason for Change _____

Supervisor _____ Phone No. (_____) _____

COMPUTER/INTERNET SKILLS: Only check those you feel proficient in.

QuickBooks: Yes ___ No ___ MS Word: Yes ___ No ___ MS Excel: Yes ___ No ___ Website Development: Yes ___ No ___

Describe other Computer/Internet/Website Skills. _____

EDUCATIONAL BACKGROUND:

Name	Years Completed	Course/Subject	Graduate? Y/N	Degree /Certificate/GED
High School				
College/University				
Additional Training	<input type="checkbox"/>			

REFERENCES: The names of two persons, not relatives, who have known you and your work for the past three years

Name _____ Name _____

Relationship _____ Relationship _____

Address _____ Address _____

Phone _____ Phone _____

Why are you seeking a position at The Breastfeeding Center?

List any Cloth Diaper/Babywearing /Breastfeeding Experience (include what types/brands of cloth diapers/carriers you have used):

Do you have any previous customer service or sales experience? If so, please describe and for how long?

What strengths/skills do you possess that would be a benefit to our business?

What are your weaknesses?

What ideas do you have to help our business grow?

PLEASE READ THE FOLLOWING CAREFULLY

I hereby certify that the information contained in this application is true and correct and agree to have any of the statements checked by the company unless I have indicated to the contrary. I authorize the company to make confidential inquiry into my suitability for the position to which I am being considered and I hereby give my consent to past employers to release the information necessary to verify my work history. Further, I release all parties and persons from any and all liability for any damage that may result from furnishing such information to the company or from the company's use or disclosure of such information by the company or any of its agents, employees or representatives.

I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer or, if I am hired, in my dismissal from employment. In consideration of my employment, I agree to conform to the rules and standards of the company, as they may be amended by the company from time to time in its discretion, and agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the company. I understand that no employee or representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I declare, under penalty of perjury, that the statements I have made in this application are true and correct and that I have read, understand, and agree to all the provisions contained in this application.

Date

Signature