



## Application for Employment

Founded in 1978, Denise Louie Education Center (DLEC) is a nonprofit organization that has grown to serve over 500 children (prenatal to five years old) and families with quality, multi-cultural preschool service, comprehensive home visiting services, and Play and Learn groups.

Denise Louie Education Center promotes school and life readiness by providing multi-cultural early learning services to vulnerable children and families. We respect and preserve each child and family's individuality, cultural heritage and home language. We promote personal and social responsibility with integrity and love in an open, tolerant and safe environment. We promote personal and social responsibility with integrity and love in a non-sexist, non-violent and non-racist environment.

Visit [www.deniselouie.org](http://www.deniselouie.org) to learn more.

### Locations:

Beacon Hill Site	3327 Beacon Ave. S. Seattle, 98144	Phone: 206-725-9740 Fax: 206-725-9775
International District Site	801 S Lane Street, Seattle, WA 98104	Phone: 206-621-7880 Fax: 206-621-8814
Lake Washington Site	9061 Seward Park Ave S, #16 Seattle, WA 98118	Phone: 206-721-0214 Fax: 206-274-4886
Early Head Start	5333 15 <sup>th</sup> Avenue S Seattle, WA 98108	Phone: 206-767-8223 Fax: 206-767-2919
Administrative Offices	1930 6 <sup>th</sup> Avenue S., Suite 401 Seattle, WA 98134	Phone: 206-973-1810 Fax: 206-260-8853

- ❖ Non-discrimination statement: Denise Louie Education Center does not discriminate in its hiring practices on the basis of race, color, religion, national origin, sex, age, sexual orientation, veteran's status, marital status, disabilities, or status in other legally protected groups.
- ❖ Criminal Background Check: Employment or volunteer service at Denise Louie Education Center is conditioned on a criminal background check as required by child care licensing and Head Start Performance Standards. The 60 categories of criminal convictions or pending charges disqualifying a person from having access to children in child care are in WAC 388-330-040.
- ❖ Transcripts/proof of credentials: Certain positions require degrees, coursework or other certifications. You will need to provide proof of your stated education prior to hire.
- ❖ Health Requirements: Employees must provide proof of negative TB test results and medical exam prior to hire.
- ❖ ADA Accommodation: DLEC will make reasonable accommodations upon request.

Please send your completed application, resume and cover letter to:  
[jobs@deniselouie.org](mailto:jobs@deniselouie.org), US mail or fax to

Human Resources  
Denise Louie Education Center  
1930 6<sup>th</sup> Avenue S., Suite 401  
Seattle, WA 98134  
Fax: 206-260-8853

Please, no phone call



# Application for Employment

## **Personal Data:**

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1. Name: \_\_\_\_\_ 2. Date \_\_\_\_\_
3. Position Applying For: \_\_\_\_\_
4. Address: \_\_\_\_\_  
 City, State zip \_\_\_\_\_
5. Telephone Number(s): \_\_\_\_\_
6. Expected Salary: \_\_\_\_\_ 7. Email \_\_\_\_\_
- | 8. Do You Have a Current:           | Yes                      | No                       |
|-------------------------------------|--------------------------|--------------------------|
| Tubercular Test Result?*            | <input type="checkbox"/> | <input type="checkbox"/> |
| Physical Exam*                      | <input type="checkbox"/> | <input type="checkbox"/> |
| Immunizations                       | <input type="checkbox"/> | <input type="checkbox"/> |
| Food Handler's Permit? **           | <input type="checkbox"/> | <input type="checkbox"/> |
| First Aid Card?                     | <input type="checkbox"/> | <input type="checkbox"/> |
| Cardiopulmonary Resuscitation Card? | <input type="checkbox"/> | <input type="checkbox"/> |
| Washington State Driver's License?  | <input type="checkbox"/> | <input type="checkbox"/> |
| HIV/Blood Born Pathogen's Training? | <input type="checkbox"/> | <input type="checkbox"/> |

\* Required for all positions prior to start.

\*\* Required for all positions prior to start. DLEC will also accept physical exams that were complete 6 months prior to start. Physical examination information is required to ensure the health and safety of children, staff and families. DLEC does not discriminate based on physical exam results. Consistent with the Americans with Disabilities Act, DLEC will make reasonable accommodations upon request.

Other certifications and trainings may or may not be required depending on the position.

## **Education:**

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9. Please list related education including high school.
- |    |                                  |                  |       |
|----|----------------------------------|------------------|-------|
| a. | School attended _____            | City&State _____ |       |
|    | Graduated y/n _____ Degree _____ | Major _____      | _____ |
| b. | School attended _____            | City&State _____ |       |
|    | Graduated y/n _____ Degree _____ | Major _____      | _____ |
| c. | School attended _____            | City&State _____ |       |
|    | Graduated y/n _____ Degree _____ | Major _____      | _____ |



**Application for Employment**

**Employment History:**

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10. Please list related previous employment starting with the most recent. Use additional sheets if necessary

a. Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

From (Month/Year) \_\_\_\_\_

To (Month/Year) \_\_\_\_\_

Job Title/Duties: \_\_\_\_\_

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Hours Per Week \_\_\_\_\_

Last Salary \_\_\_\_\_

b. Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

From (Month/Year) \_\_\_\_\_

To (Month/Year) \_\_\_\_\_

Job Title/Duties: \_\_\_\_\_

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Hours Per Week \_\_\_\_\_

Last Salary \_\_\_\_\_



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c. Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_  
Job Title/Duties: \_\_\_\_\_

Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_

d. Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
From (Month/Year) \_\_\_\_\_ To (Month/Year) \_\_\_\_\_  
Job Title/Duties: \_\_\_\_\_

Hours Per Week \_\_\_\_\_ Last Salary \_\_\_\_\_



**Application for Employment**

**Training & Workshops:**

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11. Please list other training, workshops or certifications you've completed relating to position being applied for.

Course Title	Date	Hours

**Criminal Background**

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Please complete the following questions. **Do not leave blank**, please write "N/A" if not applicable. This information is required by child care licensing and Head Start Performance Standards; and will be verified through a criminal background check prior to hire. **Applications received with this section incomplete will not be considered.**

12. Please list **all** pending and prior criminal arrests and charges related to child sexual abuse and their disposition \_\_\_\_\_

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13. Please list **all** convictions related to other forms of child abuse and neglect

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14. Please list **all** convictions for violent felonies. \_\_\_\_\_

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**Additional Information**

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15. Are you a former or current Head Start/ECEAP parent? \_\_\_\_\_

16. List any language other than English, you can speak or write?

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**Application for Employment**

**References:**

17. Please list three references including at least one professional reference. Do not include names of people that are related to you by blood or marriage.

a. Name \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_

b. Name \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_

c. Name \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship \_\_\_\_\_



**Application for Employment**

**Certification:**

18. I understand that a condition of employment is that Denise Louie Education Center must conduct local and national background checks. Therefore, if offered employment by Denise Louie Education Center I hereby authorize Denise Louie Education Center to conduct local and national background checks for the purposes of evaluating whether I am qualified for the position. I understand that Denise Louie Education Center will utilize an outside firm(s) to assist in checking such information. I also understand that I may withhold my permission and in such a case my application for employment will not be processed further.

- I agree that Denise Louie Education Center may conduct a local & national background check in the event of hire; or
- I DO NOT agree to Denise Louie Education Center conducting and local & national background check in the event of hire.

19. If employed, the employment relationship between me and Denise Louie Education Center will be at-will. This means that the employment relationship is for no specific term and may be terminated by either me or Denise Louie Education Center at any time, with or without cause or advance notice, for any reason not prohibited by law. Nothing contained in the DLEC Policies & Procedures or descriptions of benefits create a contract between you and DLEC for continued employment or any particular benefit. While employed by the organization, I agree to devote my business and professional time and energy to the conduct of the organization’s business and not devote substantial business or professional services to other interests without prior agreement.

20. I certify that the above is true and correct to the best of my knowledge. I understand that any untrue or misleading answers are cause for rejection of my application or dismissal if employed. I authorize Denise Louie Education Center to verify statements contained in this application. I authorize Denise Louie Education Center to contact references listed in this application. I further authorize the release of information related to my employment for consideration in making a hiring decision and hold the person(s) and the corporation(s) giving references harmless and free of any and all liability that could result from this process

Signature \_\_\_\_\_ Date \_\_\_\_\_