



RAINBOW DREAMS
EARLY LEARNING ACADEMY

950 W. Lake Mead Blvd.

Las Vegas, NV 89106

Telephone: 702.638.0222 | Fax: 702.638.0220

Administrator Employment Application

GENERAL INFORMATION

Name _____
Last First Middle SSN

Address _____
Street Address

_____ *City State Zip Code*

Home Phone () _____ Cell # () _____ Email _____

CERTIFICATION

For which position(s) are you applying? _____

How were you informed about the position(s)?
 Rainbow Dreams Early Learning Academy
 Kelly Services
 Other (please specify) _____

Are you presently under contract to another district? Yes _____ No _____

If Yes, when does that contract expire? _____

Base salary expectations _____

Fringe benefit expectations _____

Do you currently hold a valid School Administrator Endorsement/License in the state of Nevada? Yes _____ No _____

If yes, please list Grades _____ Status _____ Exp. Date _____

Other Certifications – List by type and expiration date:

Certification: _____ Exp. Date: _____

Certification: _____ Exp. Date: _____

Certification: _____ Exp. Date: _____

Certification: _____ Exp. Date: _____

EDUCATIONAL BACKGROUND

	School or Institutions and Location	Major/ Minor	Diploma, Degree, or Credit Earned	GPA
High School				
College/University				
College/University				
Graduate Studies				
Graduate Studies				

ADMINISTRATIVE EXPERIENCE (Last five years)
List Chronologically starting with most recent

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

TEACHING EXPERIENCE
List Chronologically starting with most recent

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

Employer	City	State	Position	Dates		
					to	

Reason for leaving _____

SPECIAL RECOGNITION OR HONORS RECEIVED:

MEMBERSHIP IN PROFESSIONAL AND CIVIC ORGANIZATIONS:

OTHER PROFESSIONAL EXPERIENCES OR ACHIEVEMENTS THAT HAVE HAD A POSITIVE IMPACT ON YOUR CAREER:

PLEASE DESCRIBE YOUR STRENGTHS IN THE AREA OF SCHOOL/COMMUNITY RELATIONS:

PLEASE DESCRIBE YOUR EDUCATIONAL PHILOSOPHY:

BACKGROUND INFORMATION

AT THE TIME OF EMPLOYMENT, YOUR FINGERPRINTS WILL BE RESEARCHED BY LOCAL, STATE AND FEDERAL LAW ENFORCEMENT AGENCIES. YOUR EMPLOYMENT WITH RAINBOW DREAMS EARLY LEARNING ACADEMY IS TEMPORARY AND PROBATIONARY PENDING SUCCESSFUL PROCESSING OF YOUR FINGERPRINTS. SEALED OR EXPUNGED RECORDS MUST BE REVEALED UNLESS THE RECORDS WERE EXPUNGED OR SEALED BY COURT ORDER IN NEVADA. YOUR OMISSION OF ANY CRIMINAL HISTORY MAY RESULT IN YOUR IMMEDIATE TERMINATION. THE FOLLOWING QUESTIONS MUST BE ANSWERED TRUTHFULLY:

Are you able to perform the essential tasks of the job for which you are applying? Yes _____ No _____

Have you ever been arrested, charged, or convicted of an offense other than a minor traffic violation? (Note: DUI and DWI convictions are not minor and must be reported.) Yes _____ No _____

Have you ever been arrested for a felony? Yes _____ No _____

Have you ever been charged with a felony? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

Have you ever been arrested (even if no contest or charges dropped or plead down) for a sex related offense? Yes _____ No _____

Have you ever been charged (even if no contest or charges dropped or plead down) with a sex related offense? Yes _____ No _____

Have you ever been convicted (even if no contest or charges dropped or plead down) of a sex related offense? Yes _____ No _____

Have you ever been arrested (even if no contest or charges dropped or plead down) for a drug related offense? Yes _____ No _____

Have you ever been charged (even if no contest or charges dropped or plead down) with a drug related offense? Yes _____ No _____

Have you ever been convicted (even if no contest or charges dropped or plead down) of a drug related offense? Yes ____ No ____

Have you ever been arrested for committing an act of violence, including domestic violence? Yes ____ No ____

Have you ever been charged with committing an act of violence, including domestic violence? Yes ____ No ____

Have you ever been convicted of committing an act of violence, including domestic violence? Yes ____ No ____

Have you ever held a teaching or substitute teaching license that has been or is in the process of being revoked? Yes ____ No ____

Have you ever been discharged, separated, or asked to resign from a position with a school district or any other entity? Yes ____ No ____

Have you ever been the subject of an investigation by a school district or any other entity? Yes ____ No ____

Have you ever had sanctions placed on your teaching certificate for any reasons? Yes ____ No ____

Have you ever been denied a teaching certificate anywhere? Yes ____ No ____

Are disciplinary actions currently pending anywhere against your certificate? Yes ____ No ____

Have you ever been issued an employment evaluation of any kind that denotes less-than-satisfactory performance? Yes ____ No ____

IF YOU ANSWER YES TO ANY OF THE QUESTIONS FROM TWO (2) THROUGH TWENTY-ONE (21), YOU MUST DIRECT A CONFIDENTIAL LETTER TO THE PRINCIPAL EXPLAINING THE SITUATION IN DETAIL. PLEASE INCLUDE COPIES OF ANY ARREST RECORD(S), AND ANY COURT DISPOSITIONS DOCUMENTS. NOTE: EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT.

PROFESSIONAL REFERENCES

Please list the full name and contact information of three professional colleagues who have specific knowledge of your competency and qualifications for the position(s) applied for.

Full Name: _____ Official Position: _____

Company: _____ Phone: () _____

Address: _____ E-Mail Address: _____

Full Name: _____ Official Position: _____

Company: _____ Phone: () _____

Address: _____ E-Mail Address: _____

Full Name: _____ Official Position: _____

Company: _____ Phone: () _____

Address: _____ E-Mail Address: _____

Full Name: _____ Official Position: _____

Company: _____ Phone: () _____

Address: _____ E-Mail Address: _____

ACKNOWLEDGEMENT OF APPLICANT

Every answer I have provided on this application is both complete and truthful. I understand and agree that (1) if any information is omitted from or not filled in this application, or if any false information is furnished, Rainbow Dreams Early Learning Academy will reject my application, (2) if any false information is furnished, I will be ineligible for any future consideration for employment and may be subject to criminal prosecution, and (3) if I am employed by Rainbow Dreams Early Learning Academy, I may be dismissed from employment and/or criminally prosecuted, if it is later determined that I have furnished false information on this application. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Applicant Signature _____ **Date:** _____

Please sign date and return to: **Rainbow Dreams Early Learning Academy**
950 W. Lake Mead Blvd.
Las Vegas, NV 89106
info@rainbowdreamsacademy.org
P. (702) 638-0222 F. (702) 638-0220

For School Official Use Only	
Date Application Received	_____
Application Received By	_____
Applicant Interviewed By	_____
Recommendation for Employment	<input type="checkbox"/> Yes <input type="checkbox"/> No

Rainbow Dreams Early Learning Academy
*is an **Equal Opportunity Employer.***