

BERTHA AGOR MEMORIAL NURSERY SCHOOL
26 East Church Street
Fairport, New York 14450
(585) 223-0380

EMPLOYMENT APPLICATION

Name: _____
Address: _____
Phone: _____
E-Mail: _____

Educational Background:

Work Experience: with dates

References: please provide three, including relationship, and phone number

1: _____ phone: _____
2: _____
3: _____

Have you ever been convicted of any crime including sex-related or child abuse offenses?
Yes ___ No ___

Signature _____ Date _____