Application for employment for Teacher and Teacher Assistant



Personal Inform	nation:		
Name:			
			Zip:
Phone Number:			
Are you legally eligible	for employment in the United St	ates?	
Are you at least 18 year	rs of age? If no, pleas	e state your age _	
Employment De	esired:		
Position Applying for:	Date availab	ole: E	Expected Salary:
Available: Full Time	Part Time Are you w	lling to work over	time if required?
Are you certified in CP	R and First Aid through the Amer	ican Red Cross?	
Are you employed now	?: May we conta	ct your employer	?
Education	Name and Location	Did you graduate?	Course of study and # of years completed
High School			
College			
College			
Other			
Please indicate any lic	enses, certifications or training w	hich qualify you	for this position:
Have you ever been co	onvicted of a felony?		
If yes, please in	dicate offence, county and state	where occurred, as	nd outcome.
Have you ever been co	onvicted of child abuse or neglect	?	

Employment History: (Please list previous three employers and attach resume)

Dates	Employer Name and Location	Position/hrly wage	Reason for Leaving
From:			
To:			
From:			
To:			
From:			
To:			

Related volunteer or unpaid experience:

Please list three references (including former employers) we may contact: Please include full mailing address)

Name and title	Address	Phone	Years Acquainted

It is understood that if employed, I will obtain an employment physical and TB test at my own expense. I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statement on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give any and all pertinent information concerning my previous employment.

The following information is requested in accordance with the State of Michigan Department of Consumer and Industry Services Child Daycare Licensing rule R 400.5102 Rule 102:

- (a) Demonstrate to the Department that he/she is of good moral character as defined in the Good Moral Character Act, Act. No, 381 of the Public Acts of 1974, as amended, being SS338.41 to 338.47 of the Michigan Compiled Laws.
- (b) Submit to a Michigan Department of State Police criminal history check and a Family Independence Agency check for a history of substantiated abuse and neglect.

Signature of Applicant	Date

Please answer the following questions completely.

 Please thoroughly describe your experiences in early childhood education. Indicate classroom experiences, age groups taught, and your strengths in working with children.

2. Please briefly describe your philosophy of early childhood education.

What characteristics environment?	s would god in	ciude in a qua	anty early le	arinig/ cinidca
environment:				
2				
			0	
What do you feel m	ost qualities y	ou for this po	sition?	

Are you willing to continue your education? If so, why?

5.