



(2010)

TEACHER EMPLOYMENT APPLICATION

NAME _____ EMAIL _____ DATE _____

ADDRESS _____

PHONE NUMBER _____ EMERGENCY PHONE _____

U. S. CITIZEN OR LEGALLY ENTITLED TO WORK IN U.S? YES / NO

POSITION APPLYING FOR: (CIRCLE ONE) INFANT / TODDLER / PRESCHOOL

DESIRED SALARY? _____ DATE YOU CAN START? _____

ESSENTIAL FUNCTIONS OF THE POSITION INCLUDE: LIFTING CHILDREN OR EQUIPMENT, CHANGING DIAPERS, AND PERFORMING ANY OTHER CHILDCARE RELATED DUTIES.

CAN YOU PERFORM THESE FUNCTIONS WITH OR WITHOUT REASONABLE ACCOMMODATIONS? YES / NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____

IF YES PLEASE EXPLAIN: _____

EDUCATION

NAME OF HIGH SCHOOL(S)	CITY/STATE	GRADUATE? YES / NO
1. _____	_____	_____
2. _____	_____	_____

NAME OF COLLEGE(S)		
1. _____	_____	_____
2. _____	_____	_____

PLEASE LIST ANY EDUCATIONAL OR PROFESSIONAL ORGANIZATIONS YOU BELONG TO THAT YOU BELIEVE ARE RELEVANT TO THE CONSIDERATION OF YOUR APPLICATION. _____

WHAT ARE YOUR PROFESSIONAL GOALS? _____

DO YOU HAVE A SPECIAL TALENT OR INTEREST THAT YOU BELIEVE WOULD BE RELEVANT TO THE CONSIDERATION OF YOUR APPLICATION? _____

EMPLOYMENT HISTORY

PLEASE LIST MOST RECENT EMPLOYMENT FIRST

NAME/PHONE	EMPLOYER	SUPERVISOR'S NAME	TO / FROM	POSITION/DUTIES	REASON FOR LEAVING
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1.	_____	_____	_____	_____	_____
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2.	_____	_____	_____	_____	_____
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3.	_____	_____	_____	_____	_____
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4.	_____	_____	_____	_____	_____
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VOLUNTEER OR UNPAID EXPERIENCE: _____

MAY I CONTACT THESE EMPLOYERS? YES / NO IF NO, PLEASE EXPLAIN. _____

REFERENCES

PROFESSIONAL

NAME AND PHONE NUMBER

OCCUPATION

TITLE

1.	_____	_____	_____
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2.	_____	_____	_____
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ACADEMIC

NAME AND PHONE NUMBER

SCHOOL

TITLE

1.	_____	_____	_____
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PERSONAL

NAME AND PHONE NUMBER

RELATIONSHIP

YEARS KNOWN

1.	_____	_____	_____
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2.	_____	_____	_____
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QUESTIONS

1. WHY YOU WOULD LIKE TO BE HIRED FOR THIS POSITION? _____

2. LIST AT LEAST TWO OF YOUR STRENGTHS AND WEAKNESSES. _____

3. FROM YOUR PAST EXPERIENCES WHAT ARE SOME OF YOUR LIKES AND DISLIKES IN CARING FOR CHILDREN OR WORKING IN A CHILDCARE SETTING? _____

4. HAVE YOU SUPERVISED OTHER STAFF? YES / NO

IF YES, WHAT WOULD YOU DO IF YOUR ASSISTANT WAS NOT COMPLETING TASKS? _____

5. PLEASE EXPLAIN HOW YOU HANDLE DISCIPLINE IN THE CLASSROOM. _____

6. EXPLAIN BRIEFLY HOW YOU WOULD HANDLE EACH SITUATION:

1. BITING _____

2. CHILD SPILLING MILK ON THE FLOOR _____

3. PARENT WHO IS UPSET BECAUSE HIS/HER CHILD IS BEING BULLIED BY ANOTHER CHILD _____

7. EXPLAIN AN ACTIVITY YOU WOULD DO WITH INFANTS, TODDLERS, PRESCHOOLERS (CHOOSE ONE). _____

9. PLEASE DESCRIBE YOURSELF IN ONE WORD. _____

10. HOW WOULD YOU RATE YOURSELF 1-10 (TEN BEING GREAT)

A. ORGANIZATION? _____ B. CLEANLINESS? _____ C. TEAM PLAYER _____

D. LIKABILITY? _____ E. HANDLE CRITICISM? _____ F. CREATIVITY? _____

11. AS PART OF THE INTERVIEW, WOULD YOU BE WILLING TO SPEND A FEW HOURS IN A CLASSROOM WORKING WITH THE CHILDREN? YES / NO

IF YES, WHAT IS A GOOD TIME TO SCHEDULE? _____

11. PLEASE USE THE AREA BELOW TO LIST ANY QUESTIONS YOU MAY HAVE. _____

THANK YOU!