APPLICATION FOR EMPLOYMENT GRACE EDGETT CHILD DEVELOPMENT CENTER

NAME		DATE
ADDRESS		PHONE
SOCIAL SECURITY #		
DO YOU OWN A CAR	DRIVERS LICENSE	DATE AND PLACE OF BIRTH
MARITAL STATUS	AGES OF CHIL	DREN, IF ANY
WHY WOULD YOU LIKE TO HA	AVE THIS POSITION	Ν?
WHAT DO YOU FEEL MOST QU		THIS POSITION?
EDUCATIONAL BACKROUN		
SPECIAL SKILLS		
EMPLOYEES BACKROUND		
HAVE YOU EVER BEEN CO IF YES, EXPLAIN		CRIMINAL OFFENSE?
REFERENCE (PLEASE GIVE	THREE OTHER 1	ΓHAN RELATIVES):
NAME:	PHON	NE: RELATIONSHIP
NAME:	PHON	NE: RELATIONSHIP
NAME:	PHON	NE: RELATIONSHIP
EDUCATIONAL PREPARA	TION:	

List courses you have taken that were related to Early Childhood Education and Human Relationships.

Related work experience (Includes duties, pay, and reason for leaving. Also, include any volunteer work.)

What community organizations are you active in?

List any certificates, awards, published materials.

Write a brief biographical statement:

How would you handle a child who talked back or hit you?

Write some general classroom rules to promote good behavior.

What basic things should we be teaching pre-schoolers that will help them later when they take their place in society?

I certify under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show any falsification, I will be dismissed and disqualified from future employment. I hereby authorize GECD to make all necessary investigations concerning me, my work habits, character, or my action in any transaction. I authorize GECD to receive records or other material pertinent to my qualifications, and further authorize and request each former employer, person given as a reference, educational institutions, or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application.

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Signature