

APPLICATION FOR EMPLOYMENT

Date of Application	<u></u>	
Name		
SSN#		
Address		
Cell Phone		
Email		
Emergency Contact		
Name		
Phone		
Address		
Education	Dates	
High School:		
College/Trade:		
College/ Irade.		
College:		
Grad. Work:		
Please enclose or forward all	transcripts or other docume	ntation.

	Additional Training-Course Title		Completi	OH	# Of Hours	
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Teacher Applicant Questionnaire

1.	If you were hired as a teacher, what skills and strengths do you think you would bring to the center?
2.	What most significant books have you read recently? What are a few of your favorite children's books and why?
3.	When you are really 'burned out" at the end of a hard day, how are you likely to behave?
4.	If you could structure a perfect job for yourself, what would it be like?
5.	Describe the type of person you would best work under.
6.	Complete the following sentences: a. Teachers need b. Children are wonderful, but c. In talking to parents, you should d. A child feels happy when
7.	What is your definition of being a Christian?
8.	Do you have a relationship with Jesus Christ? How do you know this?