The Learning Center Manchester, South Windsor, Windsor

Application for Employment

Today's Date	
Applicant's name	
Date of BirthSocia	al Security #
Address	
	11 1
Home phone	
Email address	
Emergency contact person	1 1
Relation Daytime	e phone number
Educat	tion
High School	
College/other	
Degree held	Major
Are you Head Teacher approved by the State	
CPR trained yes no Expir	ration date
	ration date
	ration date
Experie	ence
Previous employment:	
Responsibilities:	
Reason for leaving:	
Previous employment:	Dates:// to//_
Responsibilities:	
Reason for leaving:	
Reason for leaving.	
It is required by the CT Department of Public	Health to submit a state and federal
background check as well as a DCF background	
Have you ever been convicted for any violatic	
If we nlease evalain:	•
Desired wage: Da	te available to begin:
Do you have your own transportation?	
Age group preference:	
Please answer the following questions regards	ing instances that are common in childcare
settings:	

Have you had experience developing curriculum?		
Vhat do you think is the most important element in working with children?		
f a Preschool child is being aggressive to another child how would you handle the ituation?		
omeone that you have never met is picking up a child in your classroom. The person ntroduces himself as the child's father and attempts to leave with her. What should ou do?		
ou have noticed a teacher using strong language and too much physical contact with a hild. What should you do?		
Vhat are some signals that a child is ill?		
How do you think the center is affected when a teacher is out with an unscheduled bsence?		
ignature Date		

^{*}Please attach resume and references with your completed application.