



APPLICATION FOR EMPLOYMENT
SALEM PRESCHOOL

Name _____ Date _____

Address _____
Street City State Zip

Phone Number _____ Cell Phone _____ Email _____

Social Security Number _____ - _____ - _____ (To be filled in after employment)

POSITION DESIRED

Head teacher _____ Assistant teacher _____

When are you available? _____

Are you currently employed? _____

Place of employment _____ Position _____ How long? _____

May we contact your present employer? _____

EDUCATION

| Schools Attended | Dates Attended | Degree Received |
|------------------|----------------|-----------------|
|------------------|----------------|-----------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Would you be willing to continue your education by enrolling in courses or other training programs that may be recommended? _____

Please list any courses, volunteer work, hobbies or interests that would relate to the position you are applying for. _____

Are you able to perform the essential duties of the job without accommodations? yes no

FORMER EMPLOYERS

List below your last four employers, starting with the last one first

| Date (Mo./Yr.) | Employer/Address | Position | Reason for Leaving |
|----------------|------------------|----------|--------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

REFERENCES

Please list at least two persons not related to you whom you have known at least one year.

| Name | Address | Phone | Cell Phone |
|-------|---------|-------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

GENERAL INFORMATION

1. Prior to employment, employees must submit to a statement signed by their source of medical care and based on a thorough examination within three months.
2. Prior to employment, employees must pass the Minnesota background check for teachers.

I understand that misrepresentation or omission of facts called for is cause for dismissal.

Date _____ Signature _____

Please include a written resume with this application.