

THE UNIVERSITY OF MICHIGAN-DEARBORN
 SCHOOL OF EDUCATION
 EARLY CHILDHOOD EDUCATION CENTER
 CLASSROOM EMPLOYMENT APPLICATION

Date of Application: _____

Name: _____

Social Security #: _____

Address: _____
 (Number & Street) (City) (State) (Zip)

Home Phone #: _____ 2nd Phone #: _____

<i>Indicate Current Status</i>		
<input type="checkbox"/> U-M-D Student Currently Attending Class	<input type="checkbox"/> U-M-D Student Not Currently Attending Class	<input type="checkbox"/> Other (Please explain): _____

<i>Educational Background</i>						
<u>High School</u>	Year	From	To	<u>Major</u>	<u>Minor</u>	<u>Degree</u>
_____				_____	_____	_____
<u>College</u>	Year	From	To	<u>Major</u>	<u>Minor</u>	<u>Degree</u>
_____				_____	_____	_____
<u>Graduate School</u>	Year	From	To	<u>Major</u>	<u>Minor</u>	<u>Degree</u>
_____				_____	_____	_____
Please list the courses you have taken that are related to education, child development, and/or young children:						
<u>Course</u>	<u>Date Taken</u>	<u>School</u>				
_____	_____	_____				
_____	_____	_____				
_____	_____	_____				

<i>Current & Previous Employment Record</i>				May we contact your previous employers? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<u>Name & Address of Employer</u>	Dates	From	To	<u>Job Title</u>	<u>Duties</u>	<u>Salary</u>
_____				_____	_____	_____
_____				_____	_____	_____
_____				_____	_____	_____

References

<u>Name & Occupation</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate past work with children:

<u>Dates</u>		<u>Place</u>	<u>Responsibilities</u>	<u>Paid or Volunteer</u> (please check one)	
<u>From</u>	<u>To</u>			<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Please explain why you are interested in working at the UM-D Early Childhood Education Center:

Have you ever been convicted of any offense more serious than a minor traffic violation? Yes No

In particular, have you ever been convicted of abuse or neglect of an adult or a child? Yes No

If either answer is "yes", please describe:

I understand that the above information will be available to the State of Michigan Department of Social Services.

(Signature)

(Date)

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 CLASSROOM STAFF AVAILABILITY FORM

This form is for you to fill in the hours you will be available. It is not a confirmed schedule, and is subject to change by the Education Coordinator.

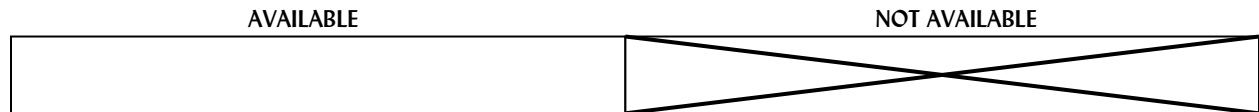
Name: _____

Home Phone #: _____ 2nd Phone #: _____

Address: _____
 (Number & Street) (City) (State) (Zip)

Current Semester: _____

PLEASE USE KEY AS INDICATED BELOW:



S = Sub

*Your schedule is contingent on the placement of all lab students.

Time	Monday	Wednesday	Friday
7:30 – 8:00 a.m.			
8:00 – 11:30 a.m.			
11:30 – 1:30 p.m.			
1:30 – 3:30 p.m.			
3:30 – 5:00 p.m.			
5:00 – 5:30 p.m.			

Time	Tuesday	Thursday
7:30 – 8:00 a.m.		
8:00 – 12:00 p.m.		
12:00 – 1:30 p.m.		
1:30 – 3:30 p.m.		
3:30 – 5:00 p.m.		
5:00 – 5:30 p.m.		

I AM ABLE TO WORK _____ HRS. PER WEEK.