

KUMCC

Kirkwood United Methodist Children's Center
Preschool and CDO creating a caring community of learners

Application Date _____ Date Available _____

PERSONAL INFORMATION

Full Name _____

Street Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

What is the best time/ method to contact you? _____

POSITION DESIRED

Lead Preschool Teacher ____ Assistant Preschool Teacher ____ Substitute Teacher ____

Child Caregiver ____ Substitute Teacher ____

Dates and Hours _____

EDUCATION

School	Name/Location	Dates Attended	Graduation Date	Degree/Diploma
Graduate				
Bachelor's or Associate's				
High School				

Other experiences, skills, and/or trainings related to Early Childhood Education

Community Involvement- List activities, leadership positions, volunteer work, etc.

EMPLOYMENT

Employer Name	Address
Telephone	Supervisor Name
Position	Dates Employed
Reason for Leaving	May we contact this employer? YES NO

Employer Name	Address
Telephone	Supervisor Name
Position	Dates Employed
Reason for Leaving	May we contact this employer? YES NO

Employer Name	Address
Telephone	Supervisor Name
Position	Dates Employed
Reason for Leaving	May we contact this employer? YES NO

REFERENCES- Please provide two professional references from individuals who are not related to you. If you do not have employment-related references, please list individuals who can comment on your work performance.

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Kirkwood United Methodist Children's Center is an Equal Opportunity Employer. It does not unlawfully discriminate on the basis of race, color, gender, nationality, ethnic origin, marital status, age, military status, or disability in the admission of students or the hiring of employees.

- I acknowledge that the answers to the above statements are true and complete.
- I understand that the misrepresentation or omission of factors on this application or on my resume or during the hiring process will eliminate me from further consideration, or if discovered after hire, will result in the termination of my employment.
- I understand that an offer of employment is contingent upon a background screening through the Missouri's Family Care Safety Registry (FCSR). This service is intended to provide information to help families and employers make informed decisions when hiring employees to work with children, the elderly and people with disabilities.
- I authorize the school to contact my prior employers, former supervisors, and other personnel for the purpose of verifying information regarding any job-related information. I further authorize all employers, schools and other persons to provide information or transcripts that may be used to determine if I am qualified to perform the job duties for which I am applying.

Printed Name _____

Signature _____ Date _____