



THE EPISCOPAL DAY SCHOOL

APPLICATION FOR EMPLOYMENT

34 North Coria
Brownsville, TX 78520
(956) 542-5231 Fax: (956) 504-9486

This form must be filled out in its entirety and signed by the applicant.

NAME: _____ SS# _____

ALIAS(S): _____ (H) Phone: _____

ADDRESS: _____ Cell Phone: _____ - _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

MAILING ADDRESS (If Different): _____

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____

POSITION DESIRED:

- Kindergarten Teacher (3-5 Year Olds)
- Elementary Teacher (Grades 1-6) Specify Grades Desired: _____
- Special Subjects (Specify) _____
- Teacher's Aid (Specify Grades Desired) _____
- Day Care Staff Kindergarten 1st thru 6th Grades
- Substitute Specify Grade(s) Desired: _____

Do you have any special health problems: Yes No

If you answered yes, explain: _____

Have you ever been convicted of or pled guilty to a felony or misdemeanor offense? Yes No

If yes, please explain: _____

Are you bilingual? Yes No

Which language(s) other than English: _____

Please provide the name of a person to notify in case of an emergency:

Name: _____ Relationship: _____

Address: _____ City: _____ State: _____

Work Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Home Phone: _____ - _____ - _____

EDUCATIONAL BACKGROUND:

High School Diploma GED College Degree Post-Graduate Degree

Name And Location Of School	Date Of Graduation	Degree/Diploma	Major

EMPLOYMENT RECORD:

Please list most recent employment first. List any teaching experience by position.

Name of Company: _____ Supervisor: _____
Dates of Service: _____ Position: _____
Job Duties: _____ Phone #: _____ - _____

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PERSONAL INFORMATION:

Please list any academic or civic awards, honors or achievements:

Hobbies or interests relevant to the job for which you are applying:

Goals for the future: _____

List any special experience, training or interests not previously mentioned:

Please list any membership in professional or civic organizations:

I feel I am qualified for this position because: _____

I hereby affirm that all information is true and accurate. I also understand that information contained in this application which proves to be false or incomplete shall be just cause for immediate termination of my employment with the Episcopal Day School. Furthermore, it is understood that this form and any other related documents become the property of the Episcopal Day School.

Signature of Applicant

Date

PLEASE ATTACH A RECENT PHOTOGRAPH

