Oakwood Academy



Employment Application

		Ар	plicant	Informa	ation			
Full Name:						Date:		
	Last	Fii	rst			М.І.		
Address:	Street Address						Apartment/Unit ‡	‡
	City					State	ZIP Code	
Phone:	,			Email				
Date Availa	ble:	Social Secur	ity No.:			Desired S	Salary: <u>\$</u>	
Position App	plied for:							
	years or older? itizen of the United Stat	YES YES PS?		If no, a	ıre you	authorized to wo	YES rk in the U.S.? □	NO
Have you e	ver worked for this com	YES pany? □	NO 🗆	If yes,	when?_			
Have you e	ver been convicted of a	YES felony?	NO 🗆					
If yes, expla	iin:							
			Educ	ation				
High Schoo	l:		Address	:				
From:	To:	Did you	graduate?	YES	NO	Diploma:		
College:			Address	<u> </u>				
From:	To:	Did you	graduate?	YES	NO	Degree:		
Other:			Address	:				
From:	To:	Did you	graduate?		NO	Degree:		
			Refer	ences				
	three professional refe	rences.						
Full Name:						Relations	hip:	

Company:			Phone:	
Address:				
Full Name:			Relationship:	
Company:			Phone:	
Address:				
Full Name:			Relationship:	
Company:			Phone:	
Address:				
		Previous Employment		
Company:			Phone:	
Address:			Supervisor:	
Job Title:		Starting Salary:\$	Ending Salary:\$	
Responsibilities:				
From:	To:	Reason for Le	eaving:	
May we contact you	r previous supervisor for		NO	
Company:			Phone:	
Address:			Supervisor:	
Job Title:		Starting Salary:	Ending Salary:	
Responsibilities:				
From:	To:	Reason for Le	eaving:	
May we contact you	r previous supervisor for		NO	
Address:			Supervisor:	
Job Title:		Starting Salary:\$	Ending Salary: <u>\$</u>	
Responsibilities:				
From:	To:	Reason for Le	eaving:	

May we contact your previous supervisor for a reference?	YES	NO □	
Disclaimer ar	nd Signat	ture	
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
Signaturo		Dato:	

Employment Interview Questions

1.	Why did you choose to apply for this position?
2.	What is your general health: fair, good, excellent?
3.	How do you rate yourself on being dependable on a scale of 1-10?
4.	What is the most important quality in a teacher? Why?
5.	What would you do if a child refuses to participate in an activity?
6.	What is your favorite age group?
7.	Do infants need to be held or allowed their independence?

8.	What is a child's greatest need?
9.	If you saw another teacher strike a child, what would you do?
10	. If a child has a high temperature in the classroom, what would you do?