

## AHAYAH ACADEMY LEARNING CENTER STAFF APPLICATION FORM

**Note:** Do not leave any field blank nor use N/A. Please answer all prompts as all apply in one way or another.

	(CENTER NAM	<b>E</b> )					
	`	,	DATE				
			POSITIO	ON DESII	RED		
			DATE A	VAILABL	E		
			INTERV	IEWED E	ЗҮ		
NAME (FIRST)	(MIDDLE)	(LAST)	SPOUS	E'S NAM	E		
HOME ADDRESS	<u> </u>		PHONE NUMBER				
BIRTH DATE		SOCIAL SECURITY NUMBER (Circle One)					
If you are under age 18, can you submit a work permit if hired?  If you are not a US citizen, do you have a VISA to work in the US?  If yes, what kind of Visa classification do you have?  Visa Registration Number:  Expiration Date							
Has bond or security clearance ever been denied and/or canceled? YES NO If yes, please explain:							
	EDUCATION (A		ntation of qualifying DATES		on) LOMA, CERTIFICATE, DEGREE		
ELEMENTARY					_		
SECONDARY COLLEGE							
OTHER							
Experience with groups of children							
(Indicate ages of children, your duties, dates of time you worked in this position, reasons for leaving)							
Attack decreased 6 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Attach documentation of experience working with children. (Circle One)  Have you attended/completed any child care training courses? YES NO If yes list:							

PLEASE LIST EMPLOYMENT HISTORY FOR THE PAST TEN YEARS, BEGINNING WITH YOUR MOST CURRENT OR LAST EMPLOYER. If you have been unemployed during any time within the past ten years, list how you spent your time, e.g. student, housewife, unemployed, etc. If you need addition space please use separate employment record form.

MONTH/YEAR	NAME AND ADDRESS OF EMPLOYER	POS	ITION
FROM			
TO			
FROM			
TO			
FROM			
TO			
FROM			
TO			
FROM			
TO			
Have you attended/completed any child care training courses? Do you have a criminal record? If yes, explain:			NO NO
investigation or other	n shown by credible evidence, e.g., a coureliable evidence to have abused, neglected erson to serious injury as a result of intentiona	or deprived	a child or adult or to
individuals with a disa process, any pre-emples supervisor is made a accommodation, you	with Disabilities Act of 1991, this program is requipability. The reasonable accommodation requiployment testing, interviews and actual empaware that an accommodation is required. may request it at <a href="mailto:any_time">any_time</a> during the interview rector of your needs <a href="mailto:if">if</a> it will impact your abiliplying.	rement appli loyment, but If you are on the process.	es to the application only if the program disabled and require You are obligated to
Having read the job de	escription for the position for which you are ap rform the duties as described?	pplying, are yo YES	ou in all respects, NO
<u> </u>			
Do you have a valid d	river's license? mber and class of license:	YES	NO
Have you had CPR tra	YES	NO	
Have you had first aid If yes, give expiration	YES	NO	
Bright from the Start:	Georgia Department of Early Care Learning care training, are you willing to participate?	YES	NO
I certify that all information concerning my qualific	ation on this application is correct. I have not coation requirements.	given any fals	se statement
SIGNATURE	D	ATE	