

"Growing Children in God."

1412 Holly Pike Carlisle, PA 17015 717-249-1327

Teacher Application Form

Personal Information

Name:	S.S.#:	B-day:	
Telephone: home:	work:	cell:	
Email:			
Address:			
Marital Status:single _	married, Spouse's Name	:	
Do you cohabitate with another	person? Relations	hip:	
Children (names & ages):			
Educational Background			
High School:	Gradu	nation:	
College:			
Degree & Date:			
Recent Training:			
Professional Organizations to w	hich you belong:		
Honors Achieved:			
Strengths/Areas of Interest:			

Teaching Experience

Name of Center/School	Ages Taught	Dates	Reason for Leaving
N			
Name of Center/School	Ages Taught	Dates	Reason for Leaving
Christian Background			
Local Church:		Atte	end Weekly?
Denomination:			

Local Church.	Attend weekly:
Denomination:	·
Are you a member?	How long?
Church Activities in which you are <i>currently</i> involved:	
Provide us with a brief testimony.	

 $\pmb{References} * \textbf{Preferably one Christian reference and two regarding care of children, no family members.}$

	I also authorize BP&D to investigate my
Signature	Date
d. Please mark if you have the follow Assessment, CY-322 Clearance, CY-113 ord Check, SP 4-164	wing documents must be acquired before wing less than 1 year old.
	Signature