

Madison

Early Childhood Learning Center 1035 Grace St. Mansfield, OH 44905 P: 419-589-7851 / F: 419-774-0557

Hours/Days: Monday – Friday

6:30 am – 6:00 pm

Preschool: 8:30 am - 11:00 am

MECLC Application for Employment

Address: D.O.B		Date:		
		Phone:		
		S.S#:		
Position applying fo	or:			
Education:	High School			
	Location:			
	Date of Graduation	/GED:		
	College:			
	Date of Graduation/Degree (Expected):			
Previous Work Exp	erience (list most recei	nt job first)		
1				
	Name		Address	
Supervisor		Position Held	Dates of Employment	
Reason for Leaving			Phone#	

	Address	
Position Held	Dates of Employment	
	Phone#	
Address		
Position Held	Dates of Employment	
	Phone#	
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Physical Exam by a physici	an?	
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ns which you feel would mal	ke you suitable to work in our	
	Physical Exam by a physicins which you feel would ma	

If yes, give particulars of each conviction and stat what disposition was made of each.
What are your methods for disciplining children?
Do you have any health or family personal situations which may interfere with the assignment of your shift hours?
Teachers are responsible for caring for children who may become sick. Are you capable of caring for or cleaning up a child that has been ill? Including vomit or bowel movement.
Name three characteristics that best describe you as a professional.
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2.
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You could be required to work in a different classroom or different hours depending on the need of the program/ emergency purpose. Are you able to do this if asked as needed?
Staff are required to attend scheduled events for the program that may occur after hours. Are you able to attend these events as needed? (Childcare will not be provided being these are working events.)
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