

School-Age Child Care Program Employee Application

Office Use Only	
Interview Date	
Interviewed by:	
Follow Up	

Applicant Information

First	Last
Address	State, City, Zip
How long have you lived in Ohio	
Contact Phone	Work
Home	Other
Email :	

Education	School/University	Degree	
High School			
College/Univ			
Post grad			

Indicate which position is of interest to you

Site Coordinator	Bachelor Degree, 5 years related experience Must work both AM & PM hours	
Program Leader	College Experience, 2 years of related experience	
Program Assistant	Excellent work history, HS Diploma	
Student Assistant	Excellent School Record	

Employment Information

Are you currently employed?	Where	Position Title
Previous Child Care Experience	Where & When	<u>Position Title</u>

Availability

When are you available to begin a new position?	
I am available to work AM hours (7-9am)	Yes No
I am available to work PM Hours (3-6pm)	Yes No
I am able to work scheduled times with the following restrictions:	
I am only able to work at the following SACC Location:	
I prefer to work at the following SACC Location:	

References (List 3 individuals you have been employed with and their telephone contact information. Do not list relatives)

Name of Reference	Relationship	Telephone Contact Information

You have my permission to contact any of the above-mentioned persons. Please Initial _____
 Have you lived in the State of OH for the last 5 consecutive years? Yes _____ No _____

Training

Please indicate any completed training programs you have attended and have documentation
 Name of training No of Hours Date Attended

Name of training	No of Hours	Date Attended
Communicable Disease Prevention		
Multi Media First Aid		
Child Abuse Recognition & Prevention		
Additional Training		

Have you ever been dismissed or not re-hired? If yes, please explain

Have you ever been convicted of a Felony and /or Child abuse? If yes please explain

Have you ever had a child removed from your home due to abuse or neglect?

I understand the following expectations and agree to complete them in an efficient manner:

1. Complete all training required by the State Department of Education, including Communicable Disease, Child Abuse Prevention, and First Aid.
2. Complete background information check, including fingerprint record
3. A physical exam (SACC will pay for your exam if you use our doctor)

The information given on the pages of this application is accurate to the best of my knowledge. I understand that falsification of this information shall be grounds for non-consideration and /or dismissal from my position.

Signature

Date

It is the policy of the Hilliard City School District Board of Education that the best qualified applicant shall be selected for each position without regard to race, color, religion, national origin, age, sex, or marital status.

******PLEASE MAIL APPLICATION TO:******

**Hilliard City Schools
 School-Age Child Care Program
 P.O. Box 877 Hilliard, OH 43026**