



2569 C.R. 220 Unit 207  
 Middleburg, Florida 32068  
 (904) 276-6500 Tel. (904) 276-6505 Fax

**APPLICATION  
 INSTRUCTIONALLY RELATED EMPLOYMENT**

Failure to Provide all Requested Information will interrupt the Processing and Consideration of Your Application.

**Date of Application:** \_\_\_\_\_

**Date when applicant can begin assignment:** \_\_\_\_\_

**(Full-time or Part-time) Hours available to work:** \_\_\_\_\_ to \_\_\_\_\_

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<b>Name: First</b>	<b>Middle</b>	<b>Last</b>	<b>Maiden</b>	<b>Social Security Number</b> ( ) -
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<b>Permanent home mailing address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Telephone Number</b>
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<b>E-mail address</b>	<b>other numbers where you can be reached</b>	<b>Date of Birth</b>
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**If you are offered employment, can you submit verification of your legal right to work in the United States?**

Yes \_\_\_ No \_\_\_

**Have you previously filed an application with any Jacksonville childcare Centers? Yes \_\_\_ No \_\_\_**

**If yes, when?** \_\_\_\_\_

**What position?** \_\_\_\_\_

**List all work or teaching experience up to present. Include dates, position held and reason for leaving.**

Employment History	Address/Phone number	Classroom (applicable)	Position	Dates of Employment	Reason For Leaving

**Number of years experience in childcare:** \_\_\_\_\_



High or preparatory school from which you graduated: \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

College/Address	Date Attended	Degree Granted	Major

Certificate Status:

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**Type of Certificate held.** **List State**  
**(Please include a copy of your certificate)**

Do you hold a first aid certificate:      Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration date \_\_\_\_\_

Do you hold a CPR certificate:            Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration date \_\_\_\_\_

List any musical instruments you play and the number of years you studied each: \_\_\_\_\_

**Please answer the following questions:**

- Have you ever held a child care license with the department of children and Families Or been registered to provide child care in your home?  
 Yes \_\_\_\_\_ No \_\_\_\_\_
- While employed in a child care program, have you ever been the subject of disciplinary action, or been the part responsible for a child care facility receiving an administration fine or other disciplinary action?  
 Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

References are very important in the selection process. Please list the people whose association with you makes them best qualified to give evaluation of your success, professionally as a teacher. Failure to complete this section will result in the delay of processing your application.

**Please list complete address including city, state, and zip code and telephone numbers**

1. Name \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Complete mailing address \_\_\_\_\_ Zip code \_\_\_\_\_

Relationship to Reference \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Complete mailing address \_\_\_\_\_ Zip code \_\_\_\_\_

Relationship to Reference \_\_\_\_\_



Salary desired \$ \_\_\_\_\_

Directions: Please answer the questions below:

1. What do you want to accomplish as a teacher? \_\_\_\_\_  
\_\_\_\_\_

2. How will (do) you decide what should be taught in your classroom?  
\_\_\_\_\_  
\_\_\_\_\_

3. What do you think provides you the greatest pleasure in teaching?  
\_\_\_\_\_  
\_\_\_\_\_

4. A parent comes and complains to you that what you are teaching is irrelevant. How would you respond?  
\_\_\_\_\_  
\_\_\_\_\_

5. How important is planning? \_\_\_\_\_  
\_\_\_\_\_

6. How important is it to preview material before teaching: \_\_\_\_\_. Support your answer \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Conviction or Dismissal**

Have you ever been convicted or received probation before judgment for a crime? (Do not include minor traffic violations for which a fine of \$100 or less was imposed.) Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been charged with a crime and are awaiting trial? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been dismissed, asked to resign, or refused reemployment Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been charged with any offense relating to children? Yes \_\_\_\_\_ No \_\_\_\_\_

In any previous employment experience, have you ever received an oral or written reprimand? Yes \_\_\_\_\_ No \_\_\_\_\_

**Affirmation**

I hereby affirm that the information given by me in this application is true and complete to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission will be sufficient cause for cancellation of the application or discharge, if I have been employed. Backpack University has my permission to contact all past and present employers.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature