Sunset Christian Preschool (SCP)

8101 27th Street West University Place, WA 98466 253.564.2522



Preschool Director Employment Application

PERSONAL

Name (last, first, middle)	Date	
Address	Phone	
Email	Cell	
Emergency Contact	Phone	
Applying for the position of	Date Available	
Have you ever worked or been associated with a nursery and/or preschool?	Yes	No

HEALTH

Is there any health condition that might affect your work with young children?	Yes	No
If so, explain:		

Please complete the following on an attached sheet:

- 1. What three qualities do you possess that make you an excellent Preschool Director?
- 2. What do you understand about young children that guides you in assisting teachers with their lesson planning?
- 3. In what ways would you respond to challenging behaviors in a classroom?
- 4. Explain how you would build relationships with parents and communicate with them.
- 5. Explain how you would build relationships and trust with your teachers.
- 5. Provide a personal philosophy of Early Childhood Education.
- 6. Provide a statement of your Christian faith.
- 7. Provide an example of a daily lesson plan for both a 3-year old class and PreK class.

EDUCATION	I/TRAINING		GRADUATION DATE	
High School				
College/Graduate School/Voc-Ted	ch.			
Major			Minor	
Degree(s)				
List all education and teacher train (Attach sheet if needed)	ning courses that n	nay be pertinent	to this position.	
	EMPLOYMENT	HISTORY 1		
Employer				
Supervisor	Supervisor's		Phone	
Beginning Date	Ending Date		Ending Wage	
Reason for leaving				
	EMPLOYMENT	HISTORY 2		
Employer	<u> </u>			
Supervisor		Supervisor's P	Phone	
Beginning Date	Ending Date		Ending Wage	
Reason for leaving				
EMPLOYMENT HISTORY 3				
Employer	Address			
Supervisor	Supervisor's Phone		Phone	
Beginning Date	Ending Date E		Ending Wage	
Reason for leaving	ı		1	

Name	Name		
Email	Email		
Address	Address		
City, State, Zip	City, State, Zip		
Phone	Phone		
Occupation	Occupation		
LEASE LIST TWO PEOPLE WE CAN CONTACT		CTER:	
Name	Name		
Relationship	Relationship		
Address	Address		
City, State, Zip	City, State, Zip		
Phone	Phone		
Email	Email		
REQUIREMENTS			
Please initial next to the volunteer requirement	ts when completed or met.	INITIALS	
l am 18 years of age or older.			
I have completed the attached criminal hist	ory and background check inquiry	· [
form for the State of Washington.			
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May inquiry be made of your present or most recent employer regarding your character,

- 2. I understand that any misrepresentation or omission of a fact on my application, resume or during the interview or hiring process may result in the refusal of employment, or if employed, immediate termination from employment.

- 3. The persons, schools, current and prior employers (provided by me in the Employment History section), and other organizations or employers named in this application are authorized by me to verify the information I have provided and to provide information that may be requested to arrive at an employment decision. I am willing that a photocopy of this authorization be accepted with the same authority as the original. I hereby waive and release all persons, schools, current and prior employers and other organizations from any liability rising from the disclosure of any of the above information whether in writing or orally, and further waive and release UPPC from any liability arising from reliance on the aforementioned information or the use, publication, or retention of such information within the context of its applicant review procedures.
- 4. I will be able, if hired, to certify that I am authorized to work in the United States of America, and understand that in accordance with the Immigration Reform and Control Act that I will be required to provide timely documentation of identity and employment eligibility.
- 5. In the event that I am employed, I agree to conform to all UPPC rules and regulations. I understand and agree that if I am employed, I shall be employed on an at-will basis. As an at-will employee, I understand and agree that either UPPC or I can terminate our employment relationship at any time for any reason, with or without advance notice and with or without cause. I understand and agree that, although over the course of my employment, other terms and conditions of my employment may change, the at-will term of my employment will not change.
- 6. Although UPPC makes every effort to accommodate individual preferences, business needs may make the following conditions necessary: Overtime, shift work, a rotating work schedule, or a work schedule that includes Saturday and/or Sunday. I understand and accept these as conditions of my employment.

orginature.	Signature:		_ Today's Date:	/
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