



# AFTER SCHOOL CARE APPLICATION

Date: \_\_\_\_\_

## PERSONAL INFORMATION

Applicant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Spouse's Name (if applicable): \_\_\_\_\_

Children (if applicable):	Name	Age
	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

Church address: \_\_\_\_\_

Pastor's name: \_\_\_\_\_ Pastor's phone: \_\_\_\_\_

Pastor's email: \_\_\_\_\_

Current state of health:    \_\_\_ Healthy    \_\_\_ Some health problems (*explain on a separate sheet*)

Recent serious illness: Yes / No (*if yes, explain on a separate sheet*)

Physical abnormalities: Yes / No (*if yes, explain on separate sheet*)

Have you ever been arrested or convicted for any criminal act? Yes / No (*if yes, explain on separate sheet*)

# EDUCATION

Name	Address	Date Graduated / Degree
Grammar School _____	_____	_____
Secondary School _____	_____	_____
College/University _____	_____	_____
Major/Minor _____	_____	_____
Graduate School _____	_____	_____
Major/Minor _____	_____	_____

## NOTE DAYS/HOURS AVAILABLE FOR WORK AND COMMENT ON ANY LIMITATIONS

\_\_\_ M \_\_\_ T \_\_\_ W \_\_\_ Th \_\_\_ F

## WORK EXPERIENCE

List work experience including employer, dates of employment, position, key responsibilities, salary history, and reason for leaving. Include/attach your resume for supporting detail.

Employer	Position / Responsibilities	Dates Employed From _____ To _____ Salary _____	Reason for Leaving
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## INTEREST AND QUALIFICATIONS

On separate sheets:

1. Provide your Christian testimony and what it means to be a Christian.
2. Express why you wish to work at Mars Hill Academy.
3. Express your qualifications for this role and how you plan to contribute to the mission of the school.
4. What specific experience do you have with after school care and working with groups of children.
5. Explain your philosophy of and experience with discipline of K-6 grade children.

## REFERENCES

Name	Address	Phone	Relationship to you
_____	_____	_____	_____
	_____	Email: _____	
_____	_____	_____	_____
	_____	Email: _____	
_____	_____	_____	_____
	_____	Email: _____	

Please submit your completed application to:

Mrs. Patsy Hall, Office Manager  
Mars Hill Academy  
4230 Aero Dr.  
Mason, OH 45040

or

[patsy.hall@marshill.edu](mailto:patsy.hall@marshill.edu)