



Employment Application

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 Fax: 218-739-3667 www.preschoolattrinity.org

MISSION STATEMENT: Trinity Lutheran School seeks to nurture children in their relationship with Jesus Christ while providing a strong academic foundation.

PERSONAL INFORMATION

Full Name _____ Today's Date _____

Home Address _____

City/State/Zip _____

Home Telephone Number _____ Are you 18 or older? _____

EDUCATION

Type of School	Name and Location	Number of Years Completed	Year of Graduation (if applicable)	Major (if applicable)	Degree/Diploma Earned
High School					
College/University					
Specialized Training/Trade School, etc.					
Other Education					

LICENSURE Do you hold any certification, credentials, or licensure, especially in the areas of child care, child development, human relations and/or education?

WORK EXPERIENCE (Begin with the most recent and work backwards chronologically, attach additional pages if necessary.)

Job Title:	
Name of Employer:	Name of Supervisor:
Address:	Employment Dates:
City/State/Zip:	Reason for Leaving:
Phone Number:	

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OTHER EXPERIENCE (Paid or Unpaid, especially experience with children; attach additional pages if necessary)
