



# Employment Application

1150 W Cavour Ave., Fergus Falls, MN 56537  
 Phone: 218-736-5847 E-mail: info@preschoolattrinity.org  
 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?

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**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)

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