

# TEACHER EMPLOYMENT APPLICATION CHILTON COUNTY CHILDREN'S CLUB AFTERSCHOOL PROGRAM

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

## EXPECTATIONS OF AFTER SCHOOL EMPLOYEES

General Function: To plan, prepare, and lead participants (School age or Adults) in the after-school program consisting of academic, enrichment, and recreation components.

- Design, plan and facilitate in activities with groups of 20+ children.
- Work with students in my homeroom for academics and provide activities for students that do not have homework.
- Create a learning environment that is positive and fun for students.
- Design activities that require active student engagement deviating from drill or worksheet driven instruction.
- Arrive at designated time.
- Request needed supplies, materials, and support in advance from site director.
- Collect and set up of equipment needed prior to the beginning of your class.
- Supervise all participants to ensure a safe and organized program.
- Handle all discipline issues and follow discipline policies and procedures.
- Assist with the planning and facilitation of special projects and events.
- Attend all site staff meetings.
- Clean up your assigned areas.
- Perform other duties as assigned.
- Seek out community volunteers and resources for afterschool program involvement.
- Secure a substitute in my absence from the approved faculty list.

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Position: \_\_\_\_\_ School: \_\_\_\_\_

Area(s) of Endorsement: \_\_\_\_\_

Certification: ( ) Rank II ( ) Rank I ( ) AA ( ) Doctorate

Number of years in public education: \_\_\_\_\_

## PROGRAM INFORMATION

How many afternoons per week would you be willing/able to work if you were selected for employment? \_\_\_\_\_

Are there specific afternoons each week when you know you would be unavailable to work in our program? If so, please list. \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed application to the CES office.