

Terri's Tutors

A Component of Churchill Center & School Community Outreach Program
1021 Municipal Center Drive
St. Louis, MO 63131
314-997-4343 ext. 260
www.churchillstl.org

NAME						
HOME ADDRESS						
	STATE					
ZIP						
	CELL PHONE					
E-MAIL						
SOCIAL SECURITY NUMBER						
DATE COMPLETING FORM						
EDUCATION	WHERE			DEGREE		
College						
Graduate Work or special training						
TEACHING EXPERIENCE INSTITUTION GRADE LEVEL SUBJECTS DATES REASON FOR LEAVING						

MISSOURI CERTIFICATIONS HELD						
OTHER EXPERIENCES (not teaching)					
REFERENCES I authorize Churchill Cented determining past employmed determine if there is any reemployed, please include some Signature:	ent history. In checking ason why you should not upervisor's name.	your references, question participate in Terri's Tu	ns will be asked to			
NAME	POSITION	ADDRESS	PHONE NUMBER			
Have you ever been arrest YesNo (Con Are you able to perform Yes No How did you learn about	viction will not necess the duties and function	arily disqualify you as				
background check. I und	f all statements contain erstand that false or min discharge. I understa	ned in this application, sleading information g	f my knowledge. I including criminal record given in my application or uired to abide by all rules			
Signatura	atura Data:					

An Equal Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability or any other legally protected status.