Teaching Assistants Application
Southern Illinois University Edwardsville
Early Childhood Center
www.siue.edu/earlychildhood/

Return application to:
Southern Illinois University Edwardsville
Early Childhood Center
795 NW University Dr., Campus Box 1076
Edwardsville, IL 62026

Date: __________________________

Applying for (indicate YEAR):
Fall _______ Spring _______ Summer _______

Name: _________________________ Age: ______ DOB: ___________ BANNER ID #: 800_________

Cell: __________________________ Home: _____________________ Other: _______________________

SIUE E-mail address: ______________________ Other E-mail address: _______________________

LOCAL (campus) address: _______________________________________________________________
(Street/City/State/Zip)

HOME (mailing) address (if applicable) : ___________________________________________________
(Street/City/State/Zip)

Driver’s license number: ______________________ State: _______ Expiration date: ______________

Major: _________________________ Year in School: _____________ Work-study? _____________

1. Have you been convicted of a violation of the law? Yes   No  (If yes, please explain on back page.)
2. Are you able to lift at least 45 pounds? Yes   No  (If yes, please explain on back of page.)
3. Number of semesters left ON CAMPUS prior to graduation: _______________________________
4. Number of hours you wish to work PER WEEK? (20 maximum) ___________________________
5. List all the FREE TIME YOU HAVE AVAILABLE TO WORK between the hours of 7:30 a.m. - 5:30 p.m.
   Monday _______ Tuesday _______ Wednesday _______ Thursday _______ Friday _______
6. Attach your CONCISE OR STUDENT DETAIL SCHEDULE for the semester you are applying for.

Experience: Include any type of paid & volunteer service, (related to child care or not), course work in
child development, hobbies and personal interests. (use back of page, if necessary)

If hired as an employee, I will attend mandatory staff meetings and abide by personnel and operational
policies and procedures of SIUE Early Childhood Center. I understand my duties may be varied, including
dish washing, meal service, changing soiled clothes, etc. I accept the responsibility of coming to work at
scheduled times. I understand failure to meet job description, or to abide by policies & procedures of SIUE
Early Childhood Center may result in termination of employment.

Signature_________________________________________ Date ______________________