

Edmonds Community College
Snohomish County Head Start & Early Head Start

POSITION QUESTIONNAIRE

TEACHER AIDE/ON-CALL AIDE



Please answer the questions in a clear and readable manner. You may use additional paper for your answers, but make sure you secure all your pages together. Answer all of the questions. Do not leave anything blank. We will use this information, along with your application, to determine who will be interviewed.

Name: _____

Date: _____

1. Are you a current or past Head Start Parent?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Please review the enclosed list of essential functions of this position. Are you able to perform ALL of the requirements on this list?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Are you at least 18 years of age?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Do you possess, or have the ability to possess, a current Snohomish Health District Food Worker Card?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Do you possess English conversational and reading skills?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Do you have a High School Diploma or GED? (If you want to receive credit for this, you must attach a copy of your diploma or GED certificate, or college transcripts)	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. Describe your work experience as a childcare worker in childcare center or preschool setting (<i>use a second sheet of paper if needed</i>):	

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8. Please describe any and all STARS Training you have received. If you wish to receive credit in the screening process, you must attach copies of your STARS certificates to this application.

9. Do you possess current certification in Adult/Pediatric CPR and First Aid?

YES NO

10. Are you fluent at an adult level in a language other than English?

YES NO

If YES, which language(s)?