



**Return this application to:**  
**Osher Marin JCC ECE Office**  
 200 N. San Pedro Rd.  
 San Rafael, CA 94903  
 Tel 415 444-8043;  
 Fax 415 479-9683  
 Email: [tlai@marinjcc.org](mailto:tlai@marinjcc.org)

**For Office Use Only**

Interview: \_\_\_\_\_  
 Comments: \_\_\_\_\_ Ref. Check: \_\_\_\_\_  
 Hire: Position: \_\_\_\_\_ Rate: \_\_\_\_\_  
 Dates: \_\_\_\_\_ Hours: \_\_\_\_\_  
 fingerprinting CPR/1<sup>st</sup> Aide

**APPLICATION FOR EARLY CHILDHOOD STAFF**

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

Local Address: \_\_\_\_\_ Phone \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Until What Date: \_\_\_\_\_

Positions Applying For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

How did you hear about jobs at the Marin JCC:  Newspaper  Internet (site: \_\_\_\_\_)  Flyer  Career Center  
 Friend, if so, who \_\_\_\_\_  Other \_\_\_\_\_

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?  
 yes \_\_\_ no . If not, describe the functions that cannot be performed\*

I am at least (check highest applicable) \_\_\_\_\_ 16 (by summer of application) \_\_\_\_\_ 18 years old or older.

**EDUCATIONAL BACKGROUND**

Name of High School; \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Graduate? Yes: \_\_\_ No: \_\_\_ GED: \_\_\_  
*name state dates major/degree graduation date*

College: \_\_\_\_\_

College: \_\_\_\_\_

Graduate School: \_\_\_\_\_

Honors/Awards: \_\_\_\_\_

**AFFILIATIONS**

Community Service and/or Associations: \_\_\_\_\_

Involvement in Jewish Programs (Religious school, Bar/Bat Mitzvah, Israel): \_\_\_\_\_

**EARLY CHILDHOOD EDUCATION**

<i>type</i>	<i>date issued</i>	<i>expiration date</i>
Permit/Certificate: _____		
<i>Course name</i>	<i>institution/college</i>	<i>date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(transcripts showing ECE units required prior to hire if applicable) Total: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Please list work experiences starting with most recent. Be sure to include paid and volunteer work with children.

1. Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Dates: \_\_\_\_\_ Position/responsibilities \_\_\_\_\_

2. Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Dates: \_\_\_\_\_ Position/responsibilities \_\_\_\_\_

3. Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Dates: \_\_\_\_\_ Position/responsibilities \_\_\_\_\_

**REFERENCES**

Please list people (not friends or relatives) who have knowledge of your background/experience with children or in leadership.

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

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

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

**For Summer Camp Applicants:**

**CAMPING BACKGROUND:** Were you ever a camper? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please indicate:

1. Day Camp \_\_\_\_\_ Resident Camp \_\_\_\_\_ 2. Day Camp \_\_\_\_\_ Resident Camp \_\_\_\_\_  
 Where: \_\_\_\_\_ Where: \_\_\_\_\_  
 When: \_\_\_\_\_ When: \_\_\_\_\_

What foreign languages do you speak? \_\_\_\_\_

**SKILLS**

Please put a L for activities that you can lead, an E for those activities for which you have at least moderate experience.

<input type="checkbox"/> storytelling	<input type="checkbox"/> nature education	<input type="checkbox"/> Hebrew songs
<input type="checkbox"/> games	<input type="checkbox"/> drama games	<input type="checkbox"/> Jewish customs
<input type="checkbox"/> Israeli folk dance	<input type="checkbox"/> improvisation	<input type="checkbox"/> leading services
<input type="checkbox"/> dance: _____	<input type="checkbox"/> sports: _____	Certifications:
<input type="checkbox"/> arts & crafts	<input type="checkbox"/> swim instruction	<input type="checkbox"/> ECE: # of units: _____
<input type="checkbox"/> mediums:	<input type="checkbox"/> song leading	<input type="checkbox"/> CPR Exp. date: _____
_____	<input type="checkbox"/> guitar	<input type="checkbox"/> 1 <sup>st</sup> Aid exp. date: _____
_____	<input type="checkbox"/> other: _____	<input type="checkbox"/> Lifeguard: exp. date: _____

Why do you want to work at OMJCC Summer Camp?  
\_\_\_\_\_  
\_\_\_\_\_

*Please attach a resume and any additional information you would like to say about yourself in application for this position*

By my signature below I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and the answers given by me are true and correct to the best of my knowledge. I hereby give the Bernard Osher Marin Jewish Community Center permission to thoroughly investigate my references and authorize my former employers to disclose to the JCC any information related to my work record.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

- We comply with the ADA and consider reasonable accommodation measures that may be necessary to eligible applicants/employees to perform essential functions.
- The Osher Marin JCC conducts a background check of all hired employees.
- Anyone hired to work in ECE must submit a record of a clear TB test, must be finger printed and have a clear record with the Department of Justice and must meet all other requirements of our licensing agency.