



## Supplemental Questionnaire

### CHILD DEVELOPMENT TEACHER - CHILD DEVELOPMENT CENTER #02-73

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PLEASE NOTE: It is your responsibility to make sure that all requested information is complete on this supplemental questionnaire. Only complete supplemental questionnaires will be considered.

***RESPONSES TO THE REQUESTED INFORMATION WILL BE REVIEWED, EVALUATED, AND SCORED. IT IS THEREFORE, VERY IMPORTANT THAT YOU PROVIDE A THOROUGH RESPONSE.***

**PLEASE TYPE OR WORD PROCESS YOUR ANSWERS ON A SEPARATE SHEET OF PAPER**

1. Do you possess a Children's Center Permit issued by the State Department of Education? If so, please attach a copy with your application packet.
2. Do you possess a valid Red Cross First Aid Certificate. If so, please attach a copy with your application packet.
3. Do you possess a valid Pediatric CPR and First Aid Certificate from the American Red Cross or other authorized agency. If so, please attach a copy with your application packet.
4. Please list your experience working in a child care center. Please list your dates of employment, whether the position was full-time or part-time and what age group you worked with. Please use the attached form for this.

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**Please print your name**