



# APPLICATION FOR STAFF POSITION

Please return to:  
Atlanta Montessori Academy  
3714 E. Main Street  
College Park, GA 30337  
404.768.5700

*(Please type or print in black ink)*

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City/State) (Zip)

Phone: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Home) (Work) (Cell)

Email: \_\_\_\_\_ SSN: \_\_\_\_\_

College Attended: \_\_\_\_\_ Degree: \_\_\_\_\_

Number and ages of children: \_\_\_\_\_

Position for which you are applying: \_\_\_\_\_

Special Qualifications: \_\_\_\_\_

Does your health limit physical activities necessary for performing the duties for which you are applying?  
 Yes  No (If yes, please explain separately and attach to this application)

Have you ever been convicted of a felony or a misdemeanor other than a traffic offense?  
 Yes  No (If yes, please explain separately and attach to this application)

## ***Experience:***

<b>Dates</b>	<b>Place of Employment</b>	<b>Position Held</b>

**References (Professional and Personal):**

1. \_\_\_\_\_  
Name Title Telephone: School Home

\_\_\_\_\_

Street City State Zip

2. \_\_\_\_\_  
Name Title Telephone: School Home

\_\_\_\_\_

Street City State Zip

3. \_\_\_\_\_  
Name Title Telephone: School Home

\_\_\_\_\_

Street City State Zip

**Equal Employment Opportunity Statement:**

Atlanta Montessori Academy does not discriminate against any employee on the basis of sex, race, national origin, age, height, weight, marital status, or handicap/disability unrelated to the employee's ability to perform his/her job.

Atlanta Montessori Academy contracts professional employees on a year to year basis only.

**Applicant Verification and Release Statement:**

I verify that the information given by me in this application is true, accurate and complete. I understand that if I have given any false information on this application or if I have omitted any material fact, I may be disqualified from employment with Atlanta Montessori Academy, or if hired, I may be discharged upon discovery of such false statement(s) or omission(s).

I further understand that my employment with Atlanta Montessori Academy is subject to a reference/background check. I hereby authorize Atlanta Montessori Academy to investigate the truthfulness of all statements made on this application and/or contact my former employer(s) and other listed reference(s) or any other person(s) who can verify any information submitted to Atlanta Montessori Academy in support of my application for employment. I hereby waive any right that I may have against any person contacted by Atlanta Montessori Academy, including former employers who provide information concerning this application and I release each said person from liability for providing information.

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

\_\_\_\_\_  
Date