



EDUCATIONAL DEVELOPMENT ASSOCIATES, INC.

14052 Northwest 82nd Avenue • Miami Lakes, Florida 33016 • Dade (305) 362-8887

Supplemental Educational Services (SES) Employee Application

Educational Development Associates, Inc. is an Equal Opportunity Company

Once you have completed the application below, you will receive a confirmation that your information has been received. After our Human Resources Department reviews your information, you may or may not be contacted with further hiring and training instructions. Part of our pre-employment process requires proof of successful completion of a **Florida State Level 2 Background Check (some counties require Drug Testing)**. Prior to being officially hired as an independent contractor or tutor, you must submit a copy of your **official teacher certificate** and or a copy of an **official college transcript** that shows completion of a **minimum of 60 college credit hours** and or a copy of your successful completion of an **official Para-Professional examination**. Hiring is based on qualification and subject matter need in your area. If you are chosen as an independent contractor or tutor, we will contact you stating your hiring status. Depending on the district's requirements, drugtesting may be required.

Name (Last, First, M.I.) _____

Social Security Number _____

Address _____ City _____

State _____ Zip Code _____ County _____

Home Phone _____ Cell Phone _____

Work Phone _____ E-mail _____

Are you a certified teacher? **Yes** **No**

Do you have a Bachelor's Degree? **Yes** **No**

Name of college or university attended _____

Degree received _____

Do you have a Master's Degree? **Yes** **No**

Name of college or university attended _____

Degree received _____

Do you have a Doctorate's Degree? **Yes** **No**

Name of college or university _____

Degree received _____

Do you have an Associate Degree? **Yes** **No**

Name of college or university _____

Degree received _____

If you do **not** have a Bachelor's Degree or Associate's Degree, list the number of college credit hours that you currently have _____

Have you successfully passed a district-administered Para-Professional exam? **Yes** **No**

Name of Para-Professional Exam _____

If you are a teacher, where do you currently teach? **County** _____

School: _____ **Grade Level** _____ **Year(s) of Experience** _____

Principal _____ **Phone** _____

Do you have tutoring experience? **Yes** **No** Year(s) of Experience _____

Are you a Reading Specialist? **Yes** **No** Year(s) of Experience _____

Are you proficient in any language other than English? **Yes** **No** **If yes, which language?** _____

*Please check the following subject areas you feel comfortable tutoring:

Elementary Math: _____ Reading: _____ Writing: _____

Middle School Math: _____ Reading: _____ Writing: _____

PLEASE LIST TWO JOB REFERENCES

Name: _____ Position: _____

Phone 1: _____ Phone 2: _____

Email: _____ Address: _____

Name: _____ Position: _____

Phone 1: _____ Phone 2: _____

Email: _____ Address: _____

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed or contracted, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant state and federal laws."

DATE _____

SIGNATURE _____