

***MORRISON ACADEMY 馬禮遜學校***

***APPLICATION FORM 工作申請表***

**This application is for:** (Click all that apply) 申請之工作 (請勾選，可複選)

**[ ]  Substitute** (for pay) 代課教師 (給薪) **[ ]  Temporary Employee** (for pay) 臨時雇員 (給薪)

**[ ]  Volunteer** 義工

**Instructions: Print or type only. Use the tab key or arrow keys to move between fields.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name as it appears on your passport 護照姓名  |

|  |  |
| --- | --- |
| English: |       |

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|  |  |
| --- | --- |
| 中文: |       |

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| Birthday (mm/dd/yy) 出生年月日 (月/日/年) |  |
| 性別 Gender |

|  |  |
| --- | --- |
| Male 男: |       |

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|  |  |
| --- | --- |
| Female 女 :  |       |

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| Present Address 目前居住地址 |       |

|  |  |
| --- | --- |
| Home Phone:      Mobile Phone:       |  |
| Email:      Soc. Sec./ Soc. Ins #:      ARC#/Taiwan ID #:        |  |

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| Address in your passport country if different than above護照所屬國家地址(若與目前居住地不同者) |       |  |
| Spouse’s Name 配偶姓名 |

|  |  |
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| English: |       |

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| 中文: |       |

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Which grades would you like to be inolved in (choose as many as apply)?

您可參與工作/協助的年級 (請勾選，可複選)

|  |  |  |
| --- | --- | --- |
| Elementary小學       | Middle School 中學       | High School 高中       |

Child/ren’s names and grade/s 您的小孩姓名及就讀年級

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name 姓名 | Grade 年級 | Name 姓名 | Grade 年級 | Name 姓名 | Grade 年級 |
|       |       |       |       |       |       |

Please describe the kinds of volunteer activities in which you would be most interested in participating (and what grades). 請說明您最有興趣協助及參與的學校活動 (請註明年級)

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|       |

List any skills or qualifications which might be useful in these activities.

請列舉可能有助於您協助與參與學校活動的技能或資格

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|       |

**Please provide 2 personal or work related references**

請提供兩名推藨人 (姓名、與您的關係、電子郵箱及電話)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name 姓名** | **Relationship** (pastor, colleague, friend) **關係** (傳道人/同事/朋友) | **E-mail 電子郵箱** | **Phone 聯絡電話** |
|       |       |       |       |
|       |       |       |       |

Active teacher certificate (If any)

|  |  |  |
| --- | --- | --- |
| **Type of certification** | **Issued by** | **Expiration date** |
|       |       |       |

**I will not hold Morrison Academy or any school employees accountable for any injury I may sustain while working at the school. 我同意在馬禮遜學校工作期間若受傷，不會歸咎於學校或學校的員工。**

***Date日期 Signature (If this form is returned by email type your name.)***

*簽名 (若以電子郵件回傳此申請表者，可以打字填寫您的姓名)*