

Early Childhood Education Laboratory Preschool

STUDENT WORKER/SUBSTITUTE APPLICATION

Thank you for your interest in substituting at the LSU Early Childhood Education Laboratory Preschool. Please complete the following application and e-mail it to ecelp@lsu.edu or nwallace@lsu.edu.

Name _____ Date of Application _____

Address _____

Phone _____ Email address _____

Educational Background: _____

Please check all applicable statements:

_____ I am a parent of a child enrolled at LSU ECELP.
Child's name _____

_____ I am a full-time college student. If yes, indicate major _____

_____ I am interested in a regular work schedule.

_____ I am interested in a work-as-needed or substitute position.

The center enrolls children from the ages of 6 weeks through 4 years. Which ages do you prefer to work with? (The toddler program enrolls children who are not toilet trained).

*****Please complete the 2nd page****

**4003 Gourrier Ave, Baton Rouge, LA 70803
(225) 578-7882
License # 11110**

LSU | College of **Human Sciences & Education**

Early Childhood Education Laboratory Preschool

Your experience with children:

References: Give 3 names (may not be relatives)

Name	Telephone #
1) _____	_____
2) _____	_____
3) _____	_____

Please indicate below your available hours to work between 7am and 5:30pm, Monday through Friday.

The following is my availability for (circle one): fall spring summer

Monday Tuesday Wednesday Thursday Friday

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For office use only:

Date of interview _____ Begin working date _____ Classroom _____

Hours assigned:
Monday Tuesday Wednesday Thursday Friday