

All Saints Academy Catholic School

295 N. Clinton St Breese, IL 62230 618-526-4323

After School Application

Personal Information		
Last	First	SSN#
Street Address		Phone Number
Email Address		
How did you hear about the position?		Birthdate
Age and Grade	Do you need a worker's permit?	Date Available
Prior Work Experience		
	Current or Most Recent	Prior
Employer		
Address		
City, State, Zip Code		
Telephone		
Name of Immediate Supervisor		
Dates of Employment	From To	From To
Position/Job Title		
Pay		
Reason for Leaving		
May We Contact	Yes No	☐ Yes ☐ No
Education		
	Name/Location	Last Year Completed
High School		9 10 11 12
College/University		1 2 3 4

References				
Please provide two references that we may contact. References cannot be family.				
Name of Contact				
Address				
City, State, Zip Code				
Telephone				
Relationship to applicant				
What qualities do you possess that will make you an excellent candidate for an After School worker?				
List the activities in which you participate (in and out of school). When? (For example: Soccer - March to June)				
1				
2				
3				
4				
correct. False information may	y certify that the above information, to prevent me from being hired or lead to be contacted regarding work records.			
Signature:		Date:		