



Muslim Community Center

15200 New Hampshire Ave

Silver Spring, MD 20905

301-384-0646

<http://mccmd.org>

2017-18 WEEKEND SCHOOL JOB APPLICATION

Email application to principal@mccmd.org

Please fill out the following information accurately and completely.

Please check the box next to the program(s) and position(s) you are applying for:

Saturday School

Sunday School

Either

Both

Qur'an Teacher

Islamic Studies Teacher

Teaching Assistant

Office Manager

Admin Asst

Name: _____ Social Security # ____-____-____
Last First and Middle

Address: _____
Street City State Zip

Date of Birth: ____/____/____ Home Phone: (____)____-____ Cell Phone: (____)____-____
M D Y

Email Address _____

EDUCATION AND TRAINING

Please provide a detailed list of your educational experiences.

Mark Highest Level Completed: High School: Some HS HS Diploma GED
 College: Associates Bachelors Masters Doctoral

Type of School	School Name City and State	Dates Attended	Major Field or Credits Earned	Degree and Date Awarded

WORK EXPERIENCE

Provide a complete record of your work history. This includes full-time work, part-time work, temporary or seasonal, internships, and volunteer work. List all experience in order, beginning with your present or most recent position. Use a supplemental sheet if additional space is needed.

Employment Dates: From _____ To _____
(Month/Year) (Month/Year)

Type of Employment:
Full time Part-time Temporary/seasonal Other

Employer: _____

Employer Address: _____
Street City State Zip

Employer Phone: (____) _____ Nature of Business: _____

Position held: _____ Name of Supervisor: _____

Job Duties: _____

Reason for leaving: _____

Employment Dates: From _____ To _____
(Month/Year) (Month/Year)

Type of Employment:
Full time Part-time Temporary/seasonal Other

Employer: _____

Employer Address: _____
Street City State Zip

Employer Phone: (____) _____ Nature of Business: _____

Position held: _____ Name of Supervisor: _____

Job Duties: _____

Reason for leaving: _____

Employment Dates: From _____ To _____
(Month/Year) (Month/Year)

Type of Employment:
Full time Part-time Temporary/seasonal Other

Employer: _____

Employer Address: _____
Street City State Zip

Employer Phone: (____) _____ Nature of Business: _____

Position held: _____ Name of Supervisor: _____

Job Duties: _____

Reason for leaving: _____

We are interested in your ability to organize and express thoughts on a specific topic in a succinct manner. Please write a short two-paragraph essay about the importance of high-quality Islamic education for youth in our community.

SPECIAL SKILLS

List any specialized skills or certifications that you have attained that relate to this position. Please be sure to list courses or fields of Qur'anic study that focused on the use of the Qaidah Nooraniyah and the study of tajweed.

List any specialized skills or hobbies that enhance your ability to work with children.

REFERENCES

Please list three references that can attest to your ability to work in the Sunday School and who are not related to you. One may be a personal reference.

Name	Address	Telephone	Occupation

ADDITIONAL INFORMATION

Please answer all of the following questions related to your employability.

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- May we contact your current employer? Yes No
 - Have you ever been convicted of a criminal offense other than a traffic violation? Yes No
 - Have you ever been fired from any job for any reason? Yes No
 - Have you ever resigned upon being notified that you would be fired from a job? Yes No
 - Are you subject to any visa or immigration status which would prevent lawful employment? Yes No

I **understand** that the submission of this Application **does not** guarantee employment at MCC Sunday School. I hereby **certify** that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete, and made in good faith. I **authorize** MCC Sunday School to investigate any statements made on this application. I **understand** that false or fraudulent information on or attached to this application may be grounds for not hiring me or firing me after I begin work and MCC has the right to take legal action. I **authorize** MCC Sunday School to contact my former employer(s) and listed references or other persons who can **verify** information, and I give **consent** for former employer(s) and other contacted persons to respond to questions pertaining to information contained in this application. Further, I **release from liability** such former employee(s) or other persons contacted by and providing information to MCC Sunday School.

Signature

Date

MAKE SURE THAT YOU HAVE ANSWERED ALL THE QUESTIONS ON THIS FORM. IF YOU HAVE NOT FILLED IT OUT COMPLETELY, IT MAY RESULT IN REJECTION OF THE APPLICATION.

(OFFICE USE ONLY)

POSITION: _____

APPROVED ____ DISAPPROVED ____ BY _____

REASON: _____

INTERVIEW DATE(S) (if applicable): _____