



JOB BANK INTAKE FORM

Employer Job Listing

NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP: _____

PHONE: _____ E-MAIL _____

CONTACT PERSON: _____

HOURS/DAYS: _____

COMPENSATION: _____ BENEFITS _____

MINIMUM REQUIREMENTS: _____

JOB TYPE:

Administrative Assistant
 Assistant Director
 Back-Up Provider
 Cook
 Custodial
 Director
 Driver
 Family Child Care Assistant
 Floater
 Para Professional/Aide
 Program Specialist
 Teacher's Assistant

TEACHER

Infants
 One Year Olds
 Two Year Olds
 Three Year Olds
 Four Year Olds
 Five Year Olds
 Kindergarten
 Head Start
 School Age

BILINGUAL

POSITION TYPE:

Full-time Part-time School-year Summer

Please mail completed form to:

Association for Supportive Child Care
3910 S. Rural Rd., Suite E
Tempe, AZ 85282
Attn: Arizona Child Care Job Bank