

Office use only Initial Start Date: \_\_\_\_\_ Final Date: \_\_\_\_\_

2024-2025



# Latch Key

OPENING THE DOOR TO OPPORTUNITY  
"PEARL GRIFFIN MEMORIAL"

2411 Coggin Avenue/P.O. Box 2121, Brownwood, Texas 76801  
325-646-2138/325-646-7066 (fax)  
www.latchkeyprogram.org latchkeyprogram76801@gmail.com

Date: \_\_\_\_\_ HPU Student ID# \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle) (S.S.#)

School Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
(Cell)

Email Address: \_\_\_\_\_

Position Desired: \_\_\_\_\_

Prefer to work with: (Circle One):

Pre-K Kinder 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup>/6<sup>th</sup> No Preference

Comments: \_\_\_\_\_

**Child Care History:** What background do you have working with children?

\_\_\_\_\_  
\_\_\_\_\_

**Educational History:**

High School Name: \_\_\_\_\_ College Name: \_\_\_\_\_

Other: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Health Conditions/Allergies: \_\_\_\_\_

Credentials or certifications held that would be beneficial to working with young children (Including CPR and First Aid and dates) \_\_\_\_\_  
\_\_\_\_\_

Classification & Major: \_\_\_\_\_ Days & Times Available: \_\_\_\_\_

**Work Experience:**

1. Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ Dates: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ Dates: \_\_\_\_\_

3. Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ Dates: \_\_\_\_\_

Briefly explain why you would like to work at Latch Key:

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**Statement:**

I acknowledge that I am aware that any employee or other person must be reassigned or removed from any contact with children if any of the following is returned.

Commission of a felony classified as an offense against the personal family or of public indecency or a violation of the Texas Controlled Substance Act. A misdemeanor classified as an offense against the person or family or of public indecency.

Have you ever been convicted of a felony or misdemeanor (Include deferred adjudication)?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give details of date, place and conviction.

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Are you currently charged with a felony or misdemeanor (including deferred adjudication)?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give details of date, place and conviction.

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I understand that in order to finalize employment requirements I must have completed a criminal history check, including fingerprinting, **at my own expense** (\$39.75 as of 04/2021). Latch Key will provide the paperwork and information regarding fingerprinting.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return with a copy of your driver's license, social security card, 1<sup>st</sup> Aid & CPR Card and class schedule (transcript schedule that shows classes, class numbers and times, must have name printed on it from HPU.**