## Family and Consumer Sciences Child Care Program Application

Name:		Grade:	
Address:	City	y/State/Zip	
Parent/Guardian Name:		Contact Number:	
Phone:	Schoo	ol Counselor:	
GPA:	Absences:	Tardies:	
Why do you want to take th	is course?:		
	en or courses that you h	have taken that will help you in this course:	
What are your education/ca	· · · ·		
What extracurricular activiti		th?	

List your schedule:

Period:	Class:	Teacher:
1		
2		
3		
4		
5		
6		
7		
8		
Advisory/Homeroom:		

Adapted and reproduced from an original submitted by Bellyn Kaplan

Please rate yourself on the following:

Always -	- 4	Usually – 3	Sometimes – 2	Seldom – 1
1. I	have good at	tendance at scho	ool.	
2. I	am reliable.			
3. I	am receptive	to constructive c	riticism.	
4. I	work well witl	n others.		
5. I	voluntarily wo	ork beyond the m	inimum requirements.	
6. I	maintain com	posure in difficul	t situations.	
7. I	am patient w	th those around	me.	
8. I	use common	sense in reasoni	ng.	
9. I	am honest w	th others.		
10. I	am on time to	o school, work an	d other appointments.	
11. I	am neat and	clean in my pers	onal grooming.	
12. I	am considera	ite of others.		
13. I	follow the rule	es of my school,	home and community.	
14. I	am healthy.			
	porform my o	lassroom duties		