

# Oregon Hope Chinese School Application Form

Personal Information					
Chinese Name:		Last name:		First name:	
Gender:		Date of Birth:		SSN:	
Immigration Status:		<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Green Card <input type="checkbox"/> Other Visa _____		Class you would like to teach:	
Emergency contact person:		Relation:		Telephone Number:	
Home Address:		Do you work or study in company or school other than Chinese school? <input type="checkbox"/> Yes <input type="checkbox"/> No      Work phone number:			
Home Phone Number:		Do you teach in other Chinese school? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Email:		When will you be available?			
Teaching Experience in the United States					
Time	School	Class	Principal's name		
Teaching Experience Outside the United States					
Time	School	Class	Principal's name		
Degrees and Awards					
Person filling this form:				Date:	
The following is used by school:					