

**DELANO UNION SCHOOL DISTRICT  
MIGRANT EDUCATION PROGRAM  
MIGRANT SUMMER ACADEMY  
INSTRUCTIONAL AIDE APPLICATION**

Please ✓ position/s you are applying for:

**S.O.L. INSTRUCTIONAL AIDE**       **SUMMER ACADEMY INSTRUCTIONAL AIDE**

NAME, LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ DATE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ (CELL): \_\_\_\_\_

CURRENT POSITION \_\_\_\_\_ LOCATION: \_\_\_\_\_

IN THE SPACE BELOW, BRIEFLY DESCRIBE HOW YOU MEET THE CRITERIA FOR SELECTION OF STAFF LISTED ON JOB ANNOUNCEMENT. LIST ANY TRAINING OR EXPERIENCE. (Please be specific.)

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REASONS YOU WOULD LIKE TO WORK FOR THE MIGRANT EDUCATION PROGRAM:

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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>For Office Use Only</b>
Test Scores: _____ Date: _____