

JOB ANNOUNCEMENT

CHILD & FAMILY DEVELOPMENT PROGRAMS Head Start

POSITION: Assistant Teacher position open in St. Helens center

HOURS: 35-40 hours per week

SALARY: \$11.74 per hour

HOW TO APPLY:

Please submit a letter of interest along with the items below:

- *Application*
- *Current resume*
- *Copy of CDA*
- *Copies of transcripts*(issued by the college - can be student issued, but not web-based)
- *Copy of degree(s)*

Please send all materials to:

Child & Family Development Programs
ATTN: Jeannie McGinley
PO Box 10
Rainier, OR 97048

jmcginley@nworheadstart.org

CHILD & FAMILY DEVELOPMENT PROGRAMS

Community Action Team, Inc.

Job Description

POSITION TITLE: Assistant Teacher **DEPARTMENT:** Human Investment

POSITION REPORTS TO: Center Manager **FTE:** 75% - 100%

POSITION DURATION: as funds permit **WRITTEN BY:** CAT Administration

PERSONS SUPERVISED: 0 **APPROVED BY:** Policy Council
APPROVAL DATE: 04/10/13

APPROVED BY: SDA
APPROVAL DATE: 02/08/13

POSITION SUMMARY:

The Assistant Teacher will work cooperatively with staff, parents, and volunteers to carry out the responsibilities of the center in order to meet the intellectual, emotional, social, and physical needs of Head Start children and their families.

QUALIFICATIONS:

Minimum:

1. Must have a CDA (Child Development Associate); one year ECE education or a one year ECE certificate from an accredited college.

Preferred:

1. AA degree in Early Childhood Education.
2. Must have one year experience working in an early childhood classroom.
3. Must have current pediatric and adult First Aid and C.P.R. cards.
4. Ability to communicate in a professional manner with children, families and co-workers in both verbal and written format.
5. Must have dependable transportation and/or valid driver's license and auto insurance.
6. Must be able to attend meetings and trainings that may require out-of-town travel and overnight stays.

7. Evidence of ability to work in a cooperative team manner, to follow directions and program policies.
8. Must be on the Central Background Registry, pass a pre-employment drug screening and TB screen.
9. Must be willing and available to work flexible hours.
10. Ability to participate in regular kneeling, stooping, bending, sitting on the floor and standing for long periods of time
11. Ability to occasionally lift up to 50 lbs.
12. Bilingual skills preferred.
13. Ability to work with low income and/or special needs families, including families from a diverse population.
14. Must have intermediate working computer skills and knowledge.

DUTIES AND RESPONSIBILITIES:

1. Assist the teacher in planning and implementing a developmentally appropriate program which meets the intellectual, emotional, social, and physical needs of each child and is based on the goals and curriculum of our program.
 - a. Participate in weekly and monthly planning for classroom activities.
 - b. Share the responsibility with the teacher of preparing, implementing, and evaluating daily classroom activities.
 - c. Assist the teacher in carrying through the individual goals set for each child in the classroom and on home visits.
2. Assist the teacher in maintaining written records on individual children and their families.
 - a. Assist in individual tracking & documentation for each child according to program standards.
 - b. Assist in assessing each child's developmental needs regularly.
 - c. Assist in writing in SOAP files.
3. Provide advocacy and support for families.
4. Promote the development of parent skills as the primary educators of their children.

- a. Work with teacher to plan assigned home visits and help to educate parents in the areas of Education, Health/Nutrition/Dental, and Social Services as outlined in program plans.
 - b. Assist Teacher in completing required home visits as needed.
 - c. Encourage parents to become "teacher" on home visits.
 - d. Encourage parents to volunteer in the classroom and attend monthly parent meetings.
 - e. Encourage and be supportive of parents and volunteers working in the classroom.
 - f. Coordinate home activities and classroom activities with the guidance of the teacher.
 - g. Role model appropriate practices for parents as classroom volunteers.
5. Assist the teacher in guiding and supervising the children in a consistent, positive manner.
 - a. Assist with constant supervision of every child.
 - b. Confer with the teacher on planned program activities.
 6. Assist the teacher in developing and maintaining a safe and healthy environment.
 - a. Share responsibility for the condition of the teachers work and storage areas.
 - b. Share in the responsibility of maintaining orderliness and cleanliness in the classroom.
 - c. Share responsibility for condition of classroom - set up, tear down and sanitize as needed.
 7. Assist the teacher with daily routines, such as toothbrushing, hand washing, bathroom, eating, and transitions between activities.
 8. Contribute to the operation of the center and program by attending and participating in center, class and program staff meetings; and sharing information gained through attendance at required trainings, workshops, and professional reading.
 9. Must maintain a working knowledge of program plans, policies, and performance standards.
 10. Assist in the evaluation and planning of program plans.
 11. Help collect in-kind for the center.

12. Help with inventory.
13. Work as a team member with all staff.
14. Must maintain program and client confidentiality policies.
15. Perform other duties as assigned by supervisor.

I have read this job description. I understand my responsibilities and will fulfill them to the best of my ability.

Number of Hours per Week: _____

Rate of Pay: _____

Staff Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

The organization reserves the right to revise or change job duties and responsibilities as the need arises. This job description does not constitute a written or implied contract of employment.



ADMIN OFFICE

P.O. Box 10
108 West B Street
Rainier, OR 97048
PHONE: (503) 556-3736
FAX: (503) 556-0705

CHILD & FAMILY DEVELOPMENT PROGRAMS

Of Community Action Team, Inc.

HEAD START PROGRAM

ASTORIA CENTER

P.O. Box 884
Astoria, OR 97103
PHONE: (503) 325-5421
FAX: (503) 325-8913

CLATSKANIE/RAINIER CENTER

P.O. Box 2
Clatskanie, OR 97016
PHONE: (503) 728-2940
FAX: (503) 728-2225

NESTUCCA VALLEY CENTER

P.O. Box 67
Cloverdale, OR 97112
PHONE: (503) 392-4449
FAX: (503) 392-3252

SEASIDE CENTER

P.O. Box 362
Seaside, OR 97138
PHONE: (503) 738-0873
FAX: (503) 738-5912

ST. HELENS CENTER

P.O. Box 239
St. Helens, OR 97051
PHONE: (503) 397-4114
FAX: (503) 397-0906

TILLAMOOK CENTER

P.O. Box 713
Tillamook, OR 97141
PHONE: (503) 842-5180
FAX: (503) 842-2580

TILLAMOOK HOME-BASED

6000 Hangar B Drive
Tillamook, OR 97141
PHONE: (503) 815-2863
FAX: (503) 815-2871

VERNONIA CENTER

P.O. Box 242
Vernonia, OR 97064
PHONE: (503) 429-9243
FAX: (503) 429-4103

WARRENTON CENTER

P.O. Box 1163
Warrenton, OR 97146
PHONE: (503) 861-9681
FAX: (503) 861-9775

PARENTING EDUCATION

P.O. Box 10
Rainier, OR 97048
PHONE: (503) 556-3736
FAX: (503) 556-0705

HEALTHY FAMILIES

125 N. 17th
St. Helens, OR 97051
PHONE: (503) 366-0800
FAX: (503) 366-0908

NOTICE TO APPLICANT

A criminal background check and FBI fingerprinting are required for people working in Early Childhood Education and care. The cost is \$35.00 to be paid online or mailed in with application.

The applicant must complete the Child Care Division's form. You can apply online with the Child Care Division at: [Office of Child Care Online Central Background Registry Application](#).

OR to print off an application to mail in, type the address below into your browser:

http://www.oregon.gov/OCC/Pages/Online_application_informationpage.aspx

Once you have completed the application for enrollment to the Central Background Registry, you will receive information on how to schedule an appointment for fingerprinting. Fingerprinting will cost an additional \$12.50 when fingerprints are taken.

The applicant must be 18 years of age to qualify for Criminal Background Registration.

Drug Screening

A pre-employment drug test will be required for every perspective employee. Test results must be negative to be employed. The cost for the screening will be paid by Community Action Team.

*Providing Head Start, Healthy Families and
Parenting Education services*

COMMUNITY ACTION TEAM, INC.

Employment Application

Date: _____ Interviewed by: _____

Position: _____ Department: _____

Name: _____
Last Middle First

Address: _____

Telephone: _____
Home Business

E-mail Address: _____

Do you have dependable means of transportation? _____

Do you have a valid Oregon Driver's License? Yes No _____
Number

List relative presently employed in Community Action Programs by name, program, relationship: _____

Date available for employment: _____

EDUCATION:

| SCHOOLS ATTENDED | FROM - TO Field of Study | DATE LEFT Month/Year | GRADUATE Month/Year | DEGREE RECEIVED |
|------------------|-----------------------------|-------------------------|------------------------|--------------------|
| High School/GED: | | | | |
| | | | | |
| | | | | |

WORK EXPERIENCE *(list most recent first)*

Firm: _____ Address: _____

Phone: _____ From: _____ To: _____

Salary/Volunteer: _____ Supervisor: _____

Job Title & Description: _____

Reason for leaving: _____

WORK EXPERIENCE *(list most recent first)*

Firm: _____ Address: _____

Phone: _____ From: _____ To: _____

Salary/Volunteer: _____ Supervisor: _____

Job Title & Description: _____

Reason for leaving: _____

WORK EXPERIENCE *(list most recent first)*

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WORK EXPERIENCE *(list most recent first)*

Firm: _____ Address: _____

Phone: _____ From: _____ To: _____

Salary/Volunteer: _____ Supervisor: _____

Job Title & Description: _____

Reason for leaving: _____

PROFESSIONAL AND PERSONAL REFERENCES

| NAME | ADDRESS | FIRM | TITLE/POSITION | TELEPHONE |
|------|---------|------|----------------|-----------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

MEMBERSHIP IN PROFESSIONAL AND/OR ASSOCIATION

Name

Year

Office Held

Honors or Awards -

Publications -

ATTACHMENTS

On one or more separate sheets, discuss your qualifications for this position. Highlight those abilities and competencies which you feel especially qualify you as an applicant. Expand, as may be appropriate, upon any of the items covered in this application such as your employment experience, job objectives or related interests. Please state the reason(s) you are applying for this job and why you feel you are a good candidate for this position.

To the best of my knowledge, all information on this application is true and correct.

Signature

Date

COMMUNITY ACTION TEAM, INCORPORATED
310 Columbia Blvd., St. Helens, Oregon 97051
CHILD & FAMILY DEVELOPMENT PROGRAMS
Declaration Form

For use by Head Start Agencies to comply with 45 CFR Part 1301, Subpart D, Head Start Grants Administration, Personnel Policies, Section 1301.31© and (d).

Name of Prospective Employee: _____

Federal policies now require that Head Start agencies require all prospective employees to sign a declaration prior to employment which lists:

1. All pending and prior criminal arrest and charges related to child sexual abuse and their disposition.
2. Convictions related to other forms of child abuse and/or neglect; and
3. All convictions of violent felonies.

The declarations may exclude:

Any offense, other than any offense related to child abuse and/or child sexual abuse or violent felonies committed before the prospective employee's 17th birthday, which was finally adjudicated in a juvenile court or under a youth offender law.

Any conviction for which the record has been expunged under Federal or State authority.

Note that individuals who declare, through this form, that they have been arrested, charged with or convicted of any of the offenses listed above are not automatically disqualified from being hired. Head Start agencies must review each case to assess the relevance of an arrest, charge or conviction to a hiring decision.

Please provide your signature on the appropriate category below:

I **have not been** arrested, charged and/or convicted on one or more of the three types of offenses listed above.

Signature

Date

I **have been** arrested, charged, and/or convicted on one or more of the three types of offenses listed above. (If so, please attach information listing the offense(s), the date(s) of the arrest, charge, and/or conviction, and other relevant information.)

Signature

Date

This information will be kept strictly confidential.

Child & Family Development Programs Pre-Employment Reference Form

Applicant: Please complete one form for each reference; provide at least three references; and include at least two supervisors.

Section 1: Applicant Information

Last Name

First Name

Middle Initial

Position Applying For

Section 2: Reference Contact Information

Contact Person

Relationship to Applicant

Title

Company Name/Address

Phone Number

Fax Number

Email Address

Section 3: Reference Information

Position Held

Dates of Employment

Reason for Leaving

Applicant: Please rate yourself on the following skills, and Child & Family Development Programs will follow up with the designated person above to confirm the information you provide.

| | | | | |
|--------------------------|-----------|------|------|------|
| Attendance | Excellent | Good | Fair | Poor |
| Relationships w/Children | Excellent | Good | Fair | Poor |
| Co-Worker Relationships | Excellent | Good | Fair | Poor |
| Communication | Excellent | Good | Fair | Poor |
| Follow-Through | Excellent | Good | Fair | Poor |
| Dependability | Excellent | Good | Fair | Poor |
| Work Ethics | Excellent | Good | Fair | Poor |
| Self-Starter | Excellent | Good | Fair | Poor |
| Decision Making | Excellent | Good | Fair | Poor |
| Honesty/Integrity | Excellent | Good | Fair | Poor |
| Flexibility | Excellent | Good | Fair | Poor |
| Empathy | Excellent | Good | Fair | Poor |

| REFERENCE Use Only | | | |
|--------------------|--|----------|--|
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |
| Agree | | Disagree | |

COMMENTS:

Section 4: Release of Information

I, _____, hereby give my permission to Child & Family Development Programs to verify my current and past employment history. Please release all information necessary regarding my employment or your personal knowledge of myself to Child & Family Development Programs.

Signature

Date

Section 5: Signature of Person Verifying Reference Information

Signature

Date

Title

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|--------------------|--|----------|--|
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