

Elite Chinese School Teacher Registration Form

Chinese Name : _____ Sex: Male ___ Female _____

English Name: _____

Home Address: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Status: US Citizen ___ Permanent Resident ___ Others _____

SSN: _____ Birthday: _____ (mm/dd/yyyy)

Degree and Certificate:

Years of Teaching: _____

Teacher Signature: _____ Date: _____

Below is for school official use only:

Teaching Position in Elite Chinese School:

Grade: _____ Course: _____

Teaching Date:

Start: _____
(mm/dd/yyyy)

End: _____
(mm/dd/yyyy)

Performance Evaluation:

Excellent ___ Good ___ Qualified ___ Not Qualified ___

Principal Signature: _____ Date: _____