



**LOS ANGELES MISSION COLLEGE**  
**Child Development Center**  
**Application for Kitchen**  
**Student Worker**

<b>NAME</b>		<b>DATE</b>
<b>ADDRESS</b>		
<b>HOME TELEPHONE</b>	<b>CELLULAR PHONE</b>	<b>E-MAIL</b>

**EDUCATIONAL BACKGROUND**

<b>NAME OF HIGH SCHOOL</b>	<b>ADDRESS</b>	<b>LAST YEAR ATTENDED</b>	<b>DIPLOMA/GED</b>
<b>NAME OF COLLEGE</b>	<b>ADDRESS</b>	<b>LAST YEAR ATTENDED</b>	<b>AA/BA/BS/MA/MAJOR</b>
<b>NAME OF VOCATIONAL</b>	<b>ADDRESS</b>	<b>LAST YEAR ATTENDED</b>	<b>CERTIFICATE</b>

**Food Service Handler Card**

<b>Food Service Handler Card Issued by</b>	<b>DATE ISSUED</b>	<b>EXPIRATION DATE</b>

**Culinary Arts Units**

<b>NUMBER OF UNITS COMPLETED</b>	<b>NUMBER OF UNITS IN PROGRESS</b>	<b>Which Culinary Arts Classes have you completed.</b>

**WORK EXPERIENCE (Start with most current employer)**

NAME OF EMPLOYER	ADDRESS	Start Date/ End Date	Why you left.
NAME OF SUPERVISOR	JOB DESCRIPTION		
BEGINNING PAY SCALE			
ENDING PAY SCALE			
NAME OF EMPLOYER	ADDRESS	Start Date/ End Date	Why you left.
NAME OF SUPERVISOR	JOB DESCRIPTION		
BEGINNING PAY SCALE			
ENDING PAY SCALE			
NAME OF EMPLOYER	ADDRESS	Start Date/ End Date	Why you left.
NAME OF SUPERVISOR	JOB DESCRIPTION		
BEGINNING PAY SCALE			
ENDING PAY SCALE			

**Volunteer Experience: (Where, When, Type)**

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**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please email the application, copy of food handler card and unofficial transcripts to [cdc@lamission.edu](mailto:cdc@lamission.edu)**