**Huaxia South Chinese School**

**教师助理申请表**

**Acknowledgement of TA Regulation Guidelines**

Please read and check the statement below, then print and sign your name.

\_\_\_\_\_ I acknowledge that I have been made aware of the ***TA Regulation Guidelines***, which can be found online at http://www.hxsouth.org/Forms/HXSouth-TARules.pdf . By signing this document, I agree that I will read the guidelines and follow all policies and procedures set forth. ( A copy of the ***TA Regulation Guidelines*** is available at the Volunteer station in the main office).

My signature below indicates that I agree to read and abide by all policies, procedures, regulations and standards in the ***TA Regulation Guidelines.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Student Name (Print) Date Student Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/ Guardian Consent**

I give my consent for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Full Name of Student Volunteer) to serve as a Student Volunteer at Huaxia South Chinese School. I realize the need for him/her to be dependable, courteous, and mature and abide by the ***TA Regulation Guidelines***.

\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Date Parent/Guardian Signature Print Full Name**

**Photo Release Form**

Permission to Use Photograph

I grant to **Huaxia South Chinese School**, its representatives and employees the right to take photographs of my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorize **Huaxia South Chinese school**, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that **Huaxia South Chinese School** may use such photographs of my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_with or without his/her name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Student Name (Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name (Print)

Signature, parent or guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if under age 18)

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TA Application Form**

 20\_\_\_\_\_\_ - 20\_\_\_\_\_\_

|  |  |
| --- | --- |
| **申请人中文姓名\*** |  |
| **申请人英文姓名\*** |  |
| **E-mail\*** |  |
| **电话\*** |  |
| **家长姓名\*** |  |
| **家长电话\*** |  |
| **家长E-mail\*** |  |
| **中文水平（现就读年级，或哪一年毕业）\***  |  |
| **可服务时间（第一节，第二节，第三节）\*** |  |
| **意向（倾向于助教哪一年级，中文课，文体课，或CSL）****(note该意向只作为参考，学校不保证满足申请人意向）** |  |

\*必须填项

递交该申请，若被录用，则申请人及其家长负有如下责任：

1. 申请人要遵守学校制度，遵守教师助理守则，认真完成指导老师分配的任务。
2. 申请人家长应了解教师助理守则并支持协助教师助理的工作。

请将申请表、个人简历（接受英文版）和其它能证明工作能力的资料电邮至taadvisor@hxsouth.org