



EMPLOYMENT GUIDE

32810 TAMINA ROAD
MAGNOLIA, TEXAS 77354

www.thesherwoodacademy.com
281.356.4970

Welcome Message



Staci Mayhill
Head Director
Founder of Sherwood

Welcome to The Sherwood Academy, home to one of the area's longest standing private schools; which includes grade school, a preschool, and a toddler and infant care program. We pride ourselves on our small class sizes, customized curriculum, and a climate that feels like home and family.

At Sherwood, we believe whole heartedly that childhood is a critical time for development, and creative growth and exploration. Our children grow and thrive in our unique model of education in all aspects of their development.

Providing the ideal educational environment for students to thrive and grow is of the utmost importance to us. To achieve this, we employ only the best. Building an environment that is child centered, fun, engaging, yet educational, as well as socially and developmentally appropriate takes a passion like no other. Each teacher and staff member employed at The Sherwood Academy share a passion for children, a passion for teaching, a passion for being life long learners, as well as a passion and a desire to change the world, one child at a time. As not only the founder of Sherwood, but also as a teacher, and active administrator at The Sherwood Academy, I have dedicated myself to making a positive difference in the lives of children and the field of education by setting a standard and providing all who work at The Sherwood Academy with the support they need to follow their passion and educate our future.

Company Over View

Our History The Sherwood Academy opened its doors for the first time on September 19th, 2001 with an enrollment of 13 students. Over the years, we have grown, expanded, and today we accommodate 200 students and over 40 staff members.

Our Mission To provide a learning environment that educates the whole child, socially, emotionally, and academically therefore paving the way for each child to develop to their full potential and cultivate a passion for lifelong learning.

Our Vision To build a school community where all children are encouraged and guided in carefully planned age-appropriate, hands-on, and engaging activities that will allow them to reach their full potential.

Our Values

- Honesty
- Integrity
- Compassion
- Dedication

What To Expect

What We Expect From You

When one enters the field of education, as a teacher, administrator, or classroom support member, one is making a commitment to uphold the standards of not only the field of education, but also the reputation of educators worldwide. You are a role model always, both inside and outside of school. When accepting a position at The Sherwood Academy, one commits themselves to;

- Arriving at school in a timely and presentable manner.
- Being prepared for the task at hand, always.
- Maintaining professionalism with fellow employees and clients at all times.
- Respecting the wishes, rights and confidentiality of all fellow employees and clients.
- Treating all co-workers, and clients with kindness, compassion, and grace.
- Working as a collaborative team for the betterment of The Sherwood Academy.
- Abiding by the minimum standards set forth by the state of Texas for licensed childcare centers.
- Abiding by all policies and procedures set forth by The Sherwood Academy and found in appendix a.
- Participate enthusiastically in all scheduled events and activities.

Application Procedures

01 Apply

Submit your resume with references to The Sherwood Academy via email at thesherwoodacademy@prodigy.net. Complete the application for employment and the request for criminal history check and return to The Sherwood Academy.

02 Interview

An in person interview will be scheduled with the head director and potential team members. Be prepared to spend approximately one hour at your interview.

03 Follow up

Once all interviews for a position have been completed we may request you to return for a second interview. During this time, additional paperwork will be requested, including copies of your drivers license, social security card, and a notarized affidavit for criminal history.

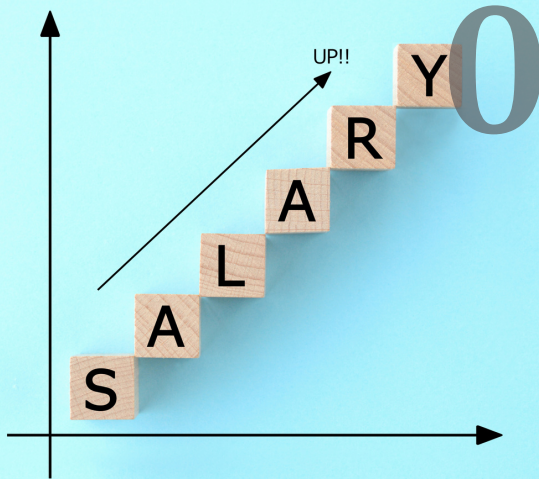
04 Preservice

All potential employees will complete a preservice training period with one of our team leaders. Employment will be contingent on this preservice training outcome. Preservice training will be paid at an hourly rate of no less than fifteen dollars per hour.

05 Contract

All employees will sign and agree to a binding contract for the term of the school year. At this time, direct deposit forms , federal tax forms, and CPR/first aid training must be completed.

Wages and Benefits



01 Salary

With just a few exceptions, all employees of The Sherwood Academy are salaried for the term of the calendar school year. Hours worked outside of scheduled salaried hours will be paid at a prearranged hourly rate or overtime rate in addition to salary. Pay is on the first and the fifteenth of each month.

Health Benefits

Each salaried employee of The Sherwood Academy will receive a monthly health benefit stipend.

02



03 Classroom Supplies

Within reason, The Sherwood Academy will provide for and reimburse for all supplies and classroom expenses.



Child Care

At The Sherwood Academy, we value family above all else. Childcare for employee children is provided based on availability at the following rates;

- First Year- No discount
- Second Year- 25% discount
- An additional 10% discount for each year thereafter.

Supply fees will be owed for all employee children at the time of enrollment each year.

04



The Sherwood Academy

Application for Employment

Personal Information:

Full Name _____ Date of Birth _____

Physical Address _____

Email _____

Home Phone _____ Cell Phone _____

Social Security Number _____ Texas Driver's License Number _____

Emergency Contact (name & phone number) _____

Education:

Name of High School _____ Graduation Date _____

Name of College _____ Highest Degree Level _____

Additional Education Information _____

Current Certificates or Trainings _____

Work History:

Please list the last two places of employment, location, dates worked and contact phone number.

I confirm that the information provided is correct. I authorize The Sherwood Academy to use the information provided to run a state background check, a federal background check as well as a central registry check.

Applicant Signature

Date

For Office Use Only:

Position Applied For _____

Date Background Check Submitted _____ Date Completed _____

CPR/First Aid Expiration Date _____ Date of Employment _____



Child Care Licensing Request for Background Check

Use this form to request background checks required by Texas Administrative Code (TAC) [§745.605](#). You can also submit background check requests through HHSC's [Child Care Provider](#) website.

See the chart below for instructions based on operation type for submitting background check requests.

If,	Then,
Your operation is a licensed child care center, school-age program, before- or after-school program, licensed child care home, registered home or residential care provider,	your operation must submit background check requests via HHSC's, Child Care Provider page.
Your operation is a listed family home, employer-based child care operation or shelter operation,	your operation may submit background check requests via HHSC's Child Care Provider page, email the form to CBCUbackgroundchecks@dfps.state.tx.us , fax the background check form to 512-339-5871, or mail the background check form to: HHSC, Centralized Background Check Unit, P.O. Box 149030, Mail Code 121-7, Austin, TX 78714-9030.

Directions: Complete the following information for each person required to have a background check. Download additional forms from the HHS forms website <https://hhs.texas.gov/laws-regulations/forms>.

Operation Information

Operation Name The Sherwood Academy	Operation No. 559306	Operation Area Code and Telephone No. 281-356-4970
Operation Address (Street, City, State, ZIP Code) 32810 Tamina Rd. Magnolia, TX 77354		
Operation Mailing Address (Street, City, State, ZIP Code) 32810 Tamina Rd. Magnolia, TX 77354		County Montgomery

Verification Signatures

I verified (by reviewing the person's Social Security card or driver license) that the information on this form contains no willful misrepresentation, and that the information given is true and complete to the best of my knowledge. I understand that HHSC may contact others and, at any time, seek proof of any information contained here. I understand that any willful misrepresentation or failure to provide identifying information within the stated time limit is a cause for denial of the application or revocation of my license, registration, or listing.

Staci Mayhill

Printed Name of Director, Owner or Operator

Staci Mayhill

Signature of Director, Owner or Operator

Date Signed

Individual's Identifying Information

Initial Renewal Fingerprint Check Required FBI Results in DPS Clearinghouse

First Name	Middle Name	Last Name
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List any other names the individual uses or has used in the past, including married and maiden names, below. If you do not provide every name that the individual has used, you may receive inaccurate results.

Other First Names	Other Middle Names	Other Last Names
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Address (Street, City, State, ZIP Code) _____

County	Area Code and Telephone No.	Date of Birth	Gender: <input type="radio"/> Male <input type="radio"/> Female
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List any other city in Texas where the person has been a resident and any addresses, including county, where the person has lived outside of Texas in the previous five years.

Ethnicity (must accompany race): <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic	Race <input type="radio"/> Asian <input type="radio"/> Black <input type="radio"/> White <input type="radio"/> Native Hawaiian/Pacific Islander <input type="radio"/> American Indian/Alaskan Native
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Social Security No.	Photo ID Type: <input type="checkbox"/> Driver License: No. _____ State _____ <input type="checkbox"/> State ID: _____ <input type="checkbox"/> Passport: _____	<input type="checkbox"/> Canadian SIN: _____	<input type="checkbox"/> Military ID: _____	<input type="checkbox"/> Permanent Resident Card: _____
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Contact information is required to schedule a fingerprint appointment. Provide both an email address and phone number for the individual.

Email _____ Area Code and Telephone No. _____

Please enter the person's email address. Do NOT enter the operation's email address. Providing an email address will allow notifications requiring action from this person to be received quickly.

Role at Operation:

Adoptive Parent Contracted Service Provider Director Foster Parent Foster/Adoptive Parent
 Household Member Frequent/Regular Visitor Licensed Administrator Owner/Permit Holder
 Staff/Employee Unverified Respite Provider Volunteer

Job Duties/Title: _____

For foster/adoptive homes only: Relationship between child/children to be placed and the foster/adoptive parent(s) or prospective foster/adoptive parent(s):

Relative Fictive Kin Unrelated

Will this person be supervised by a caregiver who is counted in the child-caregiver ratio?..... Yes No
(The supervising caregiver should be an employee of your operation or a caregiver in a foster and/or adoptive home who is otherwise able to have unsupervised access to children in your care, and who is not restricted from supervising others.)

What age(s) of children will this person be caring for?

0 – 17 months 18 months – 2 years 3 years – 4 years 5 years – 13 years 14 years – 17 years
 Over 17 years N/A