

TAPS Christian Academy

Application for Employment

Personal Information

Check one:

- New Applicant Former Applicant Former Employee

Check:

- | | | |
|--|---|---|
| <input type="checkbox"/> Administrative Assistant | <input type="checkbox"/> Finance and Accounting | <input type="checkbox"/> Office / Secretarial |
| <input type="checkbox"/> PreK / Kindergarten Teacher | <input type="checkbox"/> Elementary Teacher | <input type="checkbox"/> Middle / High School Teacher |
| <input type="checkbox"/> Physical Education | <input type="checkbox"/> Coaching | <input type="checkbox"/> Fine Arts |
| <input type="checkbox"/> Computer | <input type="checkbox"/> Foreign Language | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Library | <input type="checkbox"/> Operations | <input type="checkbox"/> Custodial |

Work preference:

- Full-time Part-time Substitute Temporary

DATE AVAILABLE: _____

WAGE DESIRED (based on position applying for as well as work hours/days: (please do not leave blank) _____

***Please be sure to complete all sections. If not applicable, mark "NA." Please Print Legibly in Ink or Type
Any incomplete information may be considered willful omission and result in your application not being considered.***

Name (Last, First, Middle Initial) E-mail Address:

Address (Number, Street, City, State, Zip)

Phone Numbers (w/Area Code) Daytime _____ Home _____ Mobile _____

If offered employment can you provide proof that you are at least 18 years old? Yes No

If presently employed, may we inquire of your employer? Yes No

Previous names under which you have worked or attended school.

Are you legally eligible for employment in the United States and can you provide documentation to verify your employment eligibility? Yes No

In case of emergency, whom should we contact?

Name _____ Phone Number _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC OFFENSE, INCLUDING SPEEDING OR PARKING VIOLATIONS)? Yes No

If yes, please explain. (Convicted means you were declared guilty by a judge or jury or you pled guilty in court. A conviction may have taken place even if you did not pay a fine or spend time in jail or prison.)

(TAPS Christian Academy reserves the right to make a criminal background check a condition of employment.)

Do you have relatives employed by TAPS Christian Academy? Yes No

If yes, provide name(s), relationship(s), and assignment.

Have you ever been disciplined, terminated, or asked to resign by a former employer? Yes No

If yes, please explain:

What church do you presently attend? (If not attending, leave blank.) _____

Pastor's name and contact information. _____

Are you a member? Yes No

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Mission

Our mission is to develop both disciples of Christ and Christian leaders for the next generation.

Motto

Philippians 4:13 I can do all things through Christ who strengthens me.

TCA employs Christian teachers who are committed...

FIRST and foremost to the spiritual growth and development of students

Second academic excellence

Striving for academic excellence without God leads to a twisted and warped mind.

Romans 1:21-22 21. Because that, when they knew God, they glorified him not as God. Neither were thankful; but became vain in their imaginations, and their foolish heart became darkened. 22. Professing themselves to be wise, they became fools.

Thank you for your interest in our school. Let us know if there is anything we can do to help you as you seek God's will for your professional life and ministry.

Statement of Christian Faith

Please describe how you became a Christian and your Christian life to this point.

Our Articles of Faith

(1) We believe the Bible to be the inspired, the only infallible, authoritative Word of God. (2) We believe that there is one God, eternally existent in the persons of the Father, Son, and Holy Spirit. (3) We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in his personal return in power and glory. (4) We believe that for the salvation of lost and sinful man regeneration by the Holy Spirit is absolutely essential. (5) We believe in the resurrection of both the saved and lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation. (6) We believe in the spiritual unity of believers in our Lord Jesus Christ. (7) We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a Godly life.

Bible - The Scriptures.

We believe that the Holy Bible was written by men divinely inspired, and is a perfect treasure of heavenly instruction; that it has God for its author, salvation for its end, and truth without any mixture of error for its matter; that it reveals the principles by which God will judge us, and therefore is, and shall remain to the end of the world, the true center of Christian union, and the supreme standard by which all human conduct, creeds, and opinions shall be tried.

We believe that the original language Texts which have been Providentially preserved and are the closest to the original autographs of the Bible are the Old Testament Traditional Masoretic Hebrew Text that underlies the King James Bible, and the New Testament Traditional Greek Text that underlies the King James Bible (as found in *The Greek Text Underlying The English Authorized Version of 1611* as published by the Trinitarian Bible Society in 1976).

Although we use many translations to compare and study, memorization will be that of the KJV.

Our Professional Standards of Conduct Members of the TAPS Christian Academy faculty and staff **always** strive to be an **unquestionable** example before their students and colleagues so they can say with the Apostle Paul, "Follow me as I follow Christ."

I subscribe to the TAPS Christian Academy Articles of Faith and Professional Standards of Conduct without reservation.

Signature of Applicant

Date

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Employment Information-All Applicants

EMPLOYMENT HISTORY

All information must be included. If all information is included on resume please check Attach resume to this application packet
Please begin with your present or most recent employer. Account for any periods of unemployment. Attach additional sheets if necessary.

_____ Company		_____ Job Title	
_____ Street Address	_____ City	_____ State	_____ Zip Code

_____ Telephone Number	_____ Fax Number
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_____ Dates Employed	From:	To:
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Description of Duties:

_____ Supervisor's Name (First)	_____ (Last)
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Reason for leaving:

Did you have a different name while working here? If so, please list: _____

_____ Company		_____ Job Title	
_____ Street Address	_____ City	_____ State	_____ Zip Code

_____ Telephone Number	_____ Fax Number
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_____ Dates Employed	From:	To:
-------------------------	-------	-----

Description of Duties:

_____ Supervisor's Name (First)	_____ (Last)
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Reason for leaving:

Did you have a different name while working here? If so, please list: _____

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Employment Information -Teaching Applicants

STUDENT TEACHING or other SUPERVISED INTERNSHIPS completed within the past five years: Yes No

School or Organization and location

Dates From To

Subject And /Or Grade-level

Supervisor's Name and Phone Number with area code

Degrees/ Diplomas Earned

Type of School *College or University *Includes Business, Trade or Correspondence Schools	Name and Location Of School	Number of Years	Major Field	Minor Field	Total Semester Hours	Major Semester Hours	Minor Semester Hours	G. P. A.

List subjects/grades you are state-licensed to teach in order of preference. If you need additional space, please attach an additional page.

License/Registration/Certification Type

State / Date Expires / Serial Number / Grade Level-Subject

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Skill Information

Do you type: Yes No Speed_____WPM

How would you characterize your computer skills? (check one)

Expert___ Intermediate___ Novice___ None___

Valid current driver's license?

Yes No

State _____

Operator's Number _____

CDL Number _____

Please indicate (✓) the administrative skills or duties which apply to your work experience/background:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Project Management | <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Phone skills | <input type="checkbox"/> MS-Word |
| <input type="checkbox"/> Data entry | <input type="checkbox"/> Accounting | <input type="checkbox"/> Written Communication | <input type="checkbox"/> MS-Excel |
| <input type="checkbox"/> Mail merge/mass mailing | <input type="checkbox"/> Accounts Receivable | <input type="checkbox"/> Customer Service | <input type="checkbox"/> Record Keeping |
| <input type="checkbox"/> Accounts Payable | <input type="checkbox"/> Sales | <input type="checkbox"/> MS-PowerPoint | <input type="checkbox"/> Filing |
| <input type="checkbox"/> Payroll | <input type="checkbox"/> Foreign Languages | <input type="checkbox"/> MS-Publisher | <input type="checkbox"/> QuickBooks |
| <input type="checkbox"/> Quicken | <input type="checkbox"/> Money Counts | <input type="checkbox"/> Website Development | |

Please check (✓) any of the following areas in which you have experience and an interest in instructing.

- Coaching
- Music
- Journalism/Yearbook
- Sport:
- Visual Arts
- Mock Trial, Debate
- Computers/Technology
- Service/Ministry
- Drama, Speech
- Chess
- Nature Studies

Briefly describe the experience you have in any of the above special areas.

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References

List four references other than family members who can testify to your character and professional abilities. Include at least two references who have supervised you in a professional capacity.

REFERENCE NUMBER ONE

Name of Reference		Job Title		
Street Address		City	State	Zip Code
Telephone Number	Fax Number	Time Applicant Has Known Reference	E-mail Address Other Telephone Number	

REFERENCE NUMBER TWO

Name of Reference		Job Title		
Street Address		City	State	Zip Code
Telephone Number	Fax Number	Time Applicant Has Known Reference	E-mail Address Other Telephone Number	

REFERENCE NUMBER THREE

Name of Reference		Job Title		
Street Address		City	State	Zip Code
Telephone Number	Fax Number	Time Applicant Has Known Reference	E-mail Address Other Telephone Number	

REFERENCE NUMBER FOUR

Name of Reference		Job Title		
Street Address		City	State	Zip Code
Telephone Number	Fax Number	Time Applicant Has Known Reference	E-mail Address Other Telephone Number	

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Applicant Authorization Statement

(Please indicate that you have read and that you understand each paragraph of the Applicant's Authorization Statement by placing your initial beside each paragraph.)

_____ I certify that this application was completed by me and that all entries and information in it are TRUE and COMPLETE to the best of my knowledge. In the event of employment, I understand that false, misleading, or omitted information in my application may result in discharge.

_____ I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that an investigation may be made and information may be obtained through interviews with the personal references and past employers, through a credit check, a criminal history check and/or a driver's record check. This inquiry may include information as to, among other things, my character, general reputation, and personal characteristics, as well as information about my work performance and workplace conduct. I consent to these investigations and to the consideration of any statements of references, former employers or others that are given in response to the inquiry. If *TAPS Christian Academy* decides to obtain a consumer credit report, I understand that *TAPS Christian Academy* will provide, at my request, the name and address of the reporting agency so I may obtain from such reporting agency the nature and substance of information contained in such report.

_____ I hereby release all parties, including but not limited to *TAPS Christian Academy*, personal references and previous employers, from liability for any injury or damage that may result from their furnishing information concerning me or any action *TAPS Christian Academy* takes on the basis of such information.

_____ I understand that, if I am offered a job, as a condition of beginning my employment, I may be required to undergo a physical examination and drug screen, and I hereby authorize any doctor, hospital, clinic, laboratory or other medical facility to furnish any medical information with reference to me as may be necessary in conjunction with that examination and related considerations.

_____ I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and United States citizenship status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.

_____ I understand that this application is not, and is not intended to be, a contract of employment at will and that any resulting employment is for no fixed period of time and is terminable at any time and for any reason by me or by *TAPS Christian Academy*. I further understand that statements that may be contained in policies, practices, handbooks or other material do not create any guarantee of employment and that *TAPS Christian Academy* has the right to modify, amend, or terminate policies, practices, benefit plans, or other programs within the limits and requirements imposed by law. I understand that no representative of *TAPS Christian Academy*, other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing to be binding.

_____ I understand that, upon employment, I may be required to sign an agreement relating to confidential information.

Signature of Applicant

Date

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Authorization for Release of Reference Information

I have made application for a position with TAPS Christian Academy. I authorize TAPS Christian Academy to inquire about my work and personal history and to verify all data given in my application for employment, related papers, and my oral interviews.

I authorize the release and giving of any information requested by TAPS Christian Academy such as employment records, performance reviews, and personal references whether such information is favorable or unfavorable to me.

I release any person, organization, or company from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I further waive the right to ever personally view any references given to TAPS Christian Academy.

I further certify that I have carefully read and do understand the above statements.

Please complete the information below and provide a signature authorizing TAPS Christian Academy to obtain information that would help us verify all data provided in your application for employment.

NAME _____ SSN _____ - _____ - _____ DATE _____

Please Print Full Name

Signature Authorization of Applicant

Position of Interest