

WAKULLA CHRISTIAN SCHOOL APPLICATION FOR EMPLOYMENT

OFFICE USE ONLY

____ File for future reference
____ Not qualified

Name _____ Date _____

Thank you for your interest in our school. Before filling out this application please take a few minutes to answer the questions below.

BACKGROUND INFORMATION:

1. What position are you applying for? _____

2. I understand that Wakulla Christian School is a Christian ministry designed to bring young people to a saving knowledge of the Lord Jesus and provide them with an outstanding education. I believe that the Lord may be calling me to serve Him in this ministry. ____ Yes ____ No

3. I am a Christian. ____ No ____ Yes The following is an account of when and how I became a Christian:

_____ (continue on back if necessary.)

4. What church do you attend? _____

5. The Pastor's name: _____ Phone No. _____

6. Do you smoke? No ____ Yes ____ Do you use any other type of tobacco? No ____ Yes ____

7. Do you drink any alcoholic beverages? No ____ Yes ____

8. Do you use any recreational drugs? No ____ Yes ____

9. Have you ever been *convicted of* or *pled guilty* to committing a crime involving the abuse or endangerment of children? No ____ Yes ____ If you answered "yes" to the above question, we regret to inform you that you are not eligible for employment at our school.

10. Have you ever been or are you currently *charged* with committing a crime involving the abuse or endangerment of children? No ____ Yes ____ If you answered "yes" please explain: _____

11. Have you ever been or are you currently being *investigated* by a governmental agency for the abuse or endangerment of children? No ____ Yes ____ If you answered "yes" please explain: _____

12. Have you ever been, or are you currently, involved in any illegal or unethical financial dealings?

No ___ Yes ___ If you answered "yes" please explain: _____

13. Have you ever been convicted of or pled guilty to a crime involving a drug related charge, a crime of theft, violence, or criminal negligence? No _____ Yes _____ If you answered "yes" please explain: _____

14. Have you ever been sued for negligence with regard to caring for or supervising children? No ___ Yes ___ If you answered "yes" please explain: _____

15. Are you in good health? No _____ Yes _____

16. Have you ever had any serious health challenges, such as heart attack, stroke, cancer, kidney disease, high blood pressure, TB, Hepatitis, HIV, Aids etc.? If so please indicate and date of illness:

SPECIAL INTERESTS OR HOBBIES:

Do you have any special interest or hobbies that you feel would be beneficial to the school, for example art, music, gardening, speak a foreign language, etc? _____ No _____ Yes _____ If "Yes" please explain: _____

Name _____
Last First Middle or Maiden

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____

E-Mail _____

Date of Birth _____ Social Security No. _____

Citizenship: U.S.A. _____ Other _____ Marital Status: Married _____

Single living alone _____ Single living with parents _____ Single living with boyfriend _____

Spouse's/Partner's Name (if applicable): _____

Employer _____ Position _____

Spouse's Employer Address: _____

Work Number _____ Cell Phone Number _____

In case of an emergency who should we contact?

Name	Phone	Cell Phone
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REFERENCES:

List name, address and phone number for 3 references who are not related to you, and who have known you for the last 5 years.

1. Name: _____ Phone: _____
Address _____ Relationship to Reference: _____

2. Name: _____ Phone: _____
Address _____ Relationship to Reference: _____

3. Name: _____ Phone: _____
Address _____ Relationship to Reference: _____

EDUCATION:

HIGH SCHOOL _____

Address _____

Years Attended _____ Diploma _____ Graduation Date _____

COLLEGE _____

Address _____

Years Attended _____ Diploma or Degree _____ Graduation Date _____

COLLEGE _____

Address _____

Years Attended _____ Diploma or Degree _____ Graduation Date _____

OTHER (Specify) _____

Address _____

Years Attended _____ Diploma or Degree _____ Graduation Date _____

FIVE YEARS WORK HISTORY: (Begin with most recent.)

EMPLOYER _____ From _____ To _____
Address _____ Telephone _____
Name of Supervisor _____
Position _____ Starting Salary _____ Ending Salary _____
Reason for Leaving _____

EMPLOYER _____ From _____ To _____
Address _____ Telephone _____
Name of Supervisor _____
Position _____ Starting Salary _____ Ending Salary _____
Reason for Leaving _____

EMPLOYER _____ From _____ To _____
Address _____ Telephone _____
Name of Supervisor _____
Position _____ Starting Salary _____ Ending Salary _____
Reason for Leaving _____

EMPLOYER _____ From _____ To _____
Address _____ Telephone _____
Name of Supervisor _____
Position _____ Starting Salary _____ Ending Salary _____
Reason for Leaving _____

EMPLOYER _____ From _____ To _____
Address _____ Telephone _____
Name of Supervisor _____
Position _____ Starting Salary _____ Ending Salary _____
Reason for Leaving _____

Will you commit to pray for Wakulla Christian School, that God will work in the lives of the children, guide and direct the leadership, and protect all those involved? No ___ Yes ___ If you answered "yes" please explain: _____

I hereby certify that the information I have provided on this application is true and complete. I authorize the school to verify the information I have provided on this application by contacting the references, schools, churches, and employers I have listed, by conducting a criminal records check, or by other means, including contacting others whom I have not listed. I authorize the references and employers listed in this application to give the school whatever information they may have regarding my character and fitness for the job for which I have applied. Furthermore, I waive any rights I may have to confidentiality.

In consideration of the receipt and evaluation of this application by Wakulla Christian School, I hereby release any individual, school, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of compliance or any attempts to comply, with this authorization.

Should my application be accepted, I agree to abide by and be bound by the policies and the moral and spiritual teachings of Wakulla Christian School and to refrain from unscriptural conduct in the performance of my duties on behalf of the school and its ministries.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion. I understand that any omission from or misinformation in the application may result in the rejection of my application, or my dismissal from employment, even if I have already been employed.

Signature of Applicant

Date

Witness Signature

Date