



GRACE

CHRISTIAN SCHOOL

801 Buck Jones Road
Raleigh NC 27606
919-783-6618
Fax 919-783-0856
www.gracechristian.net
e-mail info@gracechristian.net

TEACHER APPLICATION

Grades/content area desired _____

Application date _____ Date available _____

PERSONAL INFORMATION

Full Name _____

Miss () Mrs. () Ms. () Mr. ()

Present Address: _____

Email Address: _____

Telephone numbers: Home _____ Cell _____
Work _____

U.S. Citizen: ___ Yes ___ No, but I have valid authorization to work in the U.S.

Marital Status: Single () Engaged () Married () Widowed ()
Separated () Divorced () Remarried ()
Please attach explanation if divorced or remarried.

Spouse _____ Occupation _____
Years married _____ Number of children _____ Ages _____

CHRISTIAN BACKGROUND

Personal Testimony: Please attach a handwritten copy of your testimony.

Statement of Faith: Please carefully read our Statement of Faith and indicate your degree of support.

Church: Denominational preference _____

Local church affiliation _____

Years in attendance _____

Are you presently a member in good standing? _____

Service: List the church activities in which you regularly participate and the extent of your involvement. _____

List other ministry opportunities you have had. _____

Spiritual Growth: Describe your routine of personal Bible study and prayer. _____

What books have you read recently that have helped you spiritually? _____

PROFESSIONAL QUALIFICATIONS

Please attach photocopies of all your college transcripts. Should you be offered a position, official transcripts will be required.

Degree

Issuing Institution/Address

Date Received

Major(s) _____ Minor(s) _____

Undergraduate GPA _____

Graduate GPA _____

Additional course work: _____

PROFESSIONAL CREDENTIALS

List all teaching credentials. Please include the issuing organization, the date issued, the expiration date, and endorsement areas. Please attach photocopies.

Are you willing to pursue ACSI certification? _____

TEACHING EXPERIENCE

Total years experience _____ Christian school _____

<u>Dates</u>	<u>School/Address</u>	<u>Grades/Subjects</u>

Your most recent salary: _____

PHILOSOPHY OF CHRISTIAN EDUCATION

Attach a copy of your personal philosophy of Christian education.

Have you had any courses in the philosophy of Christian education? If so, where and when? _____

On a separate page please respond *briefly* to each of the following questions.

1. Why do you wish to work in Christian education?
2. What are the main characteristics distinguishing Christian school from public schools?
3. Describe a proper learning environment.
4. What is the role of the teacher?
5. What are your strengths and weaknesses?
6. What do you believe about the origin of the earth and mankind?
7. What do you believe about diversity in the body of Christ?
8. What three valuable lessons have you learned in working with children?
9. What three valuable lessons have you learned in working with adults?
10. Summarize any additional information you would like considered.

OTHER

List memberships in professional organizations. _____

List professional conferences or seminars you have attended. _____

List professional periodicals or books you have read. _____

List non-instructional responsibilities you have held or would be interested in holding, i.e., club advisor, coach, grade-level coordinator, etc. _____

List instructional resources you frequently use in your classroom. _____

To what degree are you familiar with classical education? _____

List your hobbies and personal interests. _____

List memberships, offices, and honors obtained in:

High school _____

College _____

Career _____

CRIMINAL HISTORY

Have you ever been convicted of a crime other than a minor traffic violation? _____
If so give the details and dates. _____

Have you ever committed any act of child abuse such as neglect, physical violence, or sexual abuse? _____ If so, give details. _____

Have you ever been investigated, charged with, or convicted of any type of child abuse including but not limited to neglect, physical violence, or sexual crimes? _____
If so give details. _____

GRACE Christian School
STATEMENT OF FAITH

THE SCRIPTURES

We believe

- a) the Bible in its entirety to be the inspired Word of God, and
- b) that it is the infallible rule of faith and conduct.

THE GODHEAD

We believe

- the Godhead exists in three Persons: Father, Son and Holy Spirit.
- These three Persons are one God, having precisely the same nature, attributes and perfections.

THE LORD JESUS CHRIST

We believe in

- a) His eternal existence as God;
- b) His Incarnation and Virgin Birth;
- c) His death on the cross as the substitutionary atonement for sin;
- d) His literal, bodily resurrection from the dead;
- e) His present ministry of intercession in heaven; and
- f) His personal, future return to earth.

THE HOLY SPIRIT

We believe that the Holy Spirit, the third Person of the Godhead:

- a) convicts men of sin and regenerates, baptizes, indwells, seals, and bestows spiritual gifts;
- b) keeps and empowers believers day by day; and
- c) is the Teacher of the Word of God and the Guide for daily living.

MAN

We believe that

- a) man was created in the image of God;
- b) Adam fell through the sin of disobedience; and therefore
- c) all mankind needs redemption.

SALVATION

We believe that

- a) salvation is by grace, a free gift from God apart from works;
- b) salvation requires repentance, a turning from one's own way to God's way;
- c) salvation is through personal faith in the Lord Jesus Christ;
- d) all who receive Jesus Christ are regenerated by the Holy Spirit and become the children of God; and
- e) true salvation will be manifested by a changed life.

THE FUTURE

We believe in

- a) the personal, visible, bodily return of Jesus Christ to earth;
- b) the bodily resurrection of the just to the eternal abode in the glory of God's presence; and
- c) the bodily resurrection of the unjust to the judgment and everlasting punishment in the lake of fire.

_____ I fully support the Statement of Faith as written without mental reservation.

Signature

_____ I support the Statement of Faith except for the areas listed and explained on a separate sheet. The exceptions represent either disagreements or areas for which I have not yet formed an opinion or conviction.

Signature

**APPLICANT'S CERTIFICATION AND AGREEMENT AND
AUTHORIZATION TO RELEASE REFERENCE INFORMATION**

I have made application for a position with GRACE Christian School. I authorize GRACE 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 understand that GRACE does not discriminate in its employment practice against any person because of sex, race, color, national or ethnic origin, or handicap. I further understand that any offer of employment is conditioned on the proof of legal authority to work in the U.S., criminal and background checks, and passing a physical examination.

I authorize the release and giving of any information requested by GRACE such as employment records, performance reviews, criminal and credit history, 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 GRACE.

I hereby certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that discovery of falsification of any statement or significant omission of fact during any phase of the hiring process may prevent me from being hired or if hired may subject me to immediate dismissal.

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

Applicant's Name
(Please Print)

Social Security Number

Applicant's Signature

Date

REFERENCES

Please distribute the enclosed reference forms. All reference forms should be sent directly to the school.

Professional
(Current principal or
teacher education advisor)

Name _____
Address _____

Telephone _____

Professional
(Co-worker or other
professional educator)

Name _____
Address _____

Telephone _____

Pastoral

Name _____
Address _____

Telephone _____

Personal

Name _____
Address _____

Telephone _____



Pastoral Reference

Applicant _____
(Please print) **Last** **First** **Middle**

Position Desired _____

To the Applicant:

All applications and accompanying records become the property of GRACE Christian School and are not available to candidates. Many people will not complete a reference unless confidentiality can be assured. **I agree for this reference to be confidential, and by signing and dating the waiver of access below, I, the undersigned, waive any right of access to this reference.**

Signature of Applicant

Date

To the Reference:

The applicant is formally applying for a teaching position. As a part of the employee selection process, references are required from persons who are uniquely familiar with the applicant's ability, potential, and past performance. Your prompt attention in completing the items below and returning the form to us will be greatly appreciated. Your reply will be considered strictly confidential. If you wish to discuss this applicant personally rather than complete this form, please check here [] and complete the bottom portion. We will contact you.

Is the applicant a member of your church? ___ Yes ___ No	Level of involvement: ___ Active ___ Inactive
If a member, for how many years? ____	Involvement includes: ___ Sunday School attendance ___ Teaching ___ Choir ___ Committees ___ Youth work ___ Other _____
Frequency of attendance: ___ Weekly ___ Monthly ___ Occasionally	

How long and in what capacity have you known the applicant? _____

To the best of your knowledge, is the applicant saved? _____

What are the applicant's strengths? _____

His weaknesses? _____

Describe how the applicant shows evidence of good character. _____

Are you aware of any experience the applicant has had with children/youth? _____

Describe how well the applicant works/relates with children/youth. _____

Would you want this person to teach your child? _____

Is there additional information you wish us to know as we consider this applicant for employment at GRACE? _____

I recommend this applicant:

Highly Favorably With reservation Not at all

Reservation: _____

Signature _____	Church _____
Name (please print) _____	Phone _____
Position _____	Date _____

PLEASE MAIL THIS FORM DIRECTLY TO THE ADDRESS BELOW OR FAX TO 919-783-0856

**GRACE Christian School
Personnel Committee
801 Buck Jones Road
Raleigh NC 27606**

If you have any questions, please call 919-783-6618.
Thank you for your help with this application process.



Personal Reference

Applicant
(Please print)

Last

First

Middle

Position Desired _____

To the Applicant:

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Signature of Applicant

Date

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How long and in what capacity have you known the applicant? _____

Does the applicant show evidence of good character? _____

Would you want your child to be taught by the applicant? _____ Why or why not? _____

What are the applicant's greatest strengths? _____

What are his/her weaknesses? _____

(Please complete back)

Additional comments: _____

I recommend this applicant:

Highly Favorably With reservation Not at all

Reservation: _____

Signature _____ Phone _____
Name (please print) _____ Date _____
Relationship to applicant _____

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Professional Reference

Applicant
(Please print)

Last

First

Middle

Position Desired _____

To the Applicant:

It is strongly recommended that you select references that can comment on work experiences as an evaluator, supervisor, former principal, etc. All applications and accompanying records become the property of GRACE Christian School and are not available to candidates. Many people will not complete a reference unless confidentiality can be assured. **I agree for this reference to be confidential, and by signing and dating the waiver of access below, I, the undersigned, waive any right of access to this reference.**

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How long have you known the applicant? _____

In what capacity? _____

Have you observed the applicant teaching? _____

What grade/content area? _____

What do you perceive as the applicant's strengths? _____

His weaknesses? _____

(Please complete the back.)

Please record a number from the following scale, which describes the applicant in comparison with persons you have known with comparable years of experience.

**1 Outstanding – top 10% 2 Above average – top 25% 3 Average – Middle 50%
4 Below average – bottom 25% (Leave blank if unobserved or unknown.)**

Accuracy and dependability		Integrity	
Assessment of pupil need		Intellectual curiosity	
Attendance		Judgment and common sense	
Classroom management skills		Leadership potential	
Cooperation with others		Loyalty to administration and system	
Correct use of standard English		Maturity (poise, self-control)	
Development of conducive learning environment		Motivation and relationship to pupils	
Effective communication		Personal hygiene and grooming	
Enthusiasm for learning and teaching		Physical fitness and health	
Evaluation of pupil progress		Positive attitude toward supervision	
Flexibility		Potential for professional growth	
Implementation of planned instruction		Professional attitude	
Initiative and creativity		Punctuality	
Instructional planning			

Would you hire/rehire the applicant? _____

Would you want this person to teach your child? _____

Is there anything else you can share relevant to the applicant working in a school setting?

I recommend this applicant:

Highly Favorably With reservation Not at all

Reservation: _____

Signature of Reference _____ School _____

Name (please print) _____ Phone _____

Position _____ Date _____

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Personnel Committee
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Professional Reference

Applicant
(Please print)

Last

First

Middle

Position Desired _____

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His weaknesses? _____

(Please complete the back.)

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Development of conducive learning environment		Motivation and relationship to pupils	
Effective communication		Personal hygiene and grooming	
Enthusiasm for learning and teaching		Physical fitness and health	
Evaluation of pupil progress		Positive attitude toward supervision	
Flexibility		Potential for professional growth	
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Instructional planning			

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Would you want this person to teach your child? _____

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I recommend this applicant:

() Highly () Favorably () With reservation () Not at all

Reservation: _____

Signature of Reference _____ School _____

Name (please print) _____ Phone _____

Position _____ Date _____

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CriminalRecordCheck.com

Background Search

Authorization to Release Personal Record Information

Please Print Top Portion

Name _____ **A.K.A.** _____
(Please Print Clearly) *First* *Middle* *Last*

Address _____ **City, State** _____ **Zip** _____
Current
Previous _____ **City, State** _____ **Zip** _____

Previous _____ **City, State** _____ **Zip** _____

SSN _____ **DOB** _____ (For identification only)

Drivers License Number _____ **State issued** _____

List all convictions including traffic and criminal

<u>Year</u>	<u>Criminal Offense(s)</u> <u>Offense</u>	<u>County</u>	<u>Year</u>	<u>Traffic Offense(s)</u> <u>Offense</u>	<u>County</u>
1.	_____	_____	1.	_____	_____
2.	_____	_____	2.	_____	_____
3.	_____	_____	3.	_____	_____
4.	_____	_____	4.	_____	_____

I hereby authorize and request any present or former employer, school, police department (Criminal History or Criminal Background Check), financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about me to furnish bearer with any and all information in their possession regarding me, in order that my employment qualifications may be evaluated. This information may include: *my record of arrests and, or convictions for violations of any federal, state, local statutes or ordinances, my employment history, my credit history, workers compensation history, and driving record. I hereby release any said person, companies or law enforcement authorities from any liability for any damage whatsoever for issuing this information.* I further understand this information may be reviewed initially and periodically by Criminalrecordcheck.com, and reported to my prospective employer.

I understand my prospective employer intends to utilize the investigation into my background for employment purposes only, and shall not disclose such information to any other party. I hereby acknowledge that Criminalrecordcheck.com cannot vouch for or guarantee accuracy of information provided by third parties. Accordingly, I release Criminalrecordcheck.com, its agents and / or my prospective employer from any and all liability arising out of any errors or omissions regarding my background information and authorize Criminalrecordcheck.com to release the results of its investigation to my prospective employer.

Applicant signature: _____ **Date:** _____
PLEASE SIGN - DO NOT PRINT

California Applicants Only: Check here if you wish to receive a copy of any report that may be generated as a result of this authorization. (CA. AB655 as amended)

Must be completed by client before investigation will be performed

Client: _____ **Store/Plant#:** _____ **Manager:** _____

Date: ___/___/___ **Phone:** (____) _____ **Fax:** (____) _____

Manager, please indicate which reports you require

Criminal ___ Credit ___ SSN Verification ___ Workers Compensation ___ Driving Records ___

Fax this form to: 800-650-5992

NOTICE AND ACKNOWLEDGEMENT

[IMPORTANT - - PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGEMENT]

NOTICE REGARDING BACKGROUND INVESTIGATION

Employer (Grace Christian) may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature of the scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your criminal, education and/or employment history conducted by: **CriminalRecordCheck.com, PO Box 90998, Raleigh, NC 27675-0998, 877-272-0266**. The scope of this notice and authorization is all-encompassing, however, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly.

ACKNOWLEDGEMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer report” and/or “investigative consumer reports” at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **CriminalRecordCheck.com**, another outside organization acting on behalf of Employer itself. I agree that a facsimile (“fax”) or photographic copy of this Authorization shall be as valid as the original.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California Law.

Signature: _____ Date: _____

Print Name: _____

Para information en español, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center , Room 130-A 600 Pennsylvania Ave. N. W., Washington, D.C. 20580.

A Summary of Your Rights under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed, but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- You may limit “prescreened” offers of credit and insurance you get based on information in your credit report. Unsolicited “prescreened” offers for credit and insurance must include a toll free phone number you can call if you choose to remove your name and address from the list these offers are based on. You may opt-out with the nationwide credit bureaus at 888-5-OPT-OUT (888-567-2688) or www.opoutprescreen.com.
- You may seek damages from violators. If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	Contacts:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center- FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (Word “Federal” or initials :F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State –chartered banks that are not members of the Federal Reserve System.	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20250 202-720-7051
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051