



ACADEMY TEACHER/TEACHER ASSISTANT APPLICATION

Your interest in Grace Covenant Academy is appreciated. We invite you to fill out this initial application and return it to our school office. If an opening occurs for which it appears you may qualify, we will gladly consider your application. We may also contact your references. If we have continued interest in your candidacy, we will arrange for a personal interview.

We realize that the key to a successful Christian school is its staff. We are grateful for those who are professionally qualified, who really love children, and who, by the pattern of their lives, are Christian role models. Luke 6:40

We look forward to receiving your initial application. Thank you for your interest in the ministry of our school. It is our prayer that God will fulfill His perfect will in the lives of all applicants.

A. APPLICANT'S NAME AND ADDRESS

Full name: _____

Social Security Number: _____ Application date: _____

Race (Optional): _____ Available date: _____

Current Address: _____

Current E-Mail Address: _____

Home Phone: _____ Cell Phone: _____

Permanent Address and Phone number if different from current address: _____

How long have you lived at the above address? _____

*** On a separate paper please list any additional addresses where you have resided at any time during the past five years.

B. POSITION DESIRED

Please indicate your 1st, and 2nd choices in the parenthesis.

Pre-K/3 Day M-W Pre-K/5 Day M-F Kindergarten First Second

Third Fourth Fifth

Check all positions for which you are interested in:

Teacher _____ Teaching Assistant _____

Full time _____ Part time _____ Substitute _____

I'm also qualified to teach: Music _____ Art _____ PE _____ Spanish _____

How did you learn about the position for which you are applying?

C. CHRISTIAN BACKGROUND

Do you believe the Bible to be the ONLY inspired and infallible Word of God, our final authority in all matters of faith, truth and conduct?

Yes _____ No _____

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

DECLARATION OF FAITH

Grace Covenant Academy holds to the twenty-two tenets of faith of the International Church of the Foursquare Gospel as compiled by its founder, Aimee Semple McPherson.

1. The Holy Scriptures
2. The Eternal God-head
3. The Fall of Man
4. The Plan of Redemption
5. Salvation through Grace
6. Repentance and Acceptance
7. The New Birth
8. Daily Christian Life
9. Water Baptism and the Lord's Supper
10. The Baptism of the Holy Spirit
11. The Spirit-filled Life
12. The Gifts and Fruit of the Spirit
13. Moderation
14. Divine Healing
15. The Second Coming of Christ
16. Church Relationship
17. Civil Government
18. Judgment
19. Heaven
20. Hell
21. Evangelism
22. Tithes and Offerings

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

_____ I support the Statement of Faith except for the area(s) listed and explained on the reverse side of this page. The exceptions represent either disagreements or items for which I have not yet formed an opinion or conviction.

Signature: _____ Denominational affiliation _____ What is your local church affiliation? _____

In what church activities are you involved and with what degree of regularity?

Are you comfortable teaching a Bible class? _____

What books have you read recently that helped you spiritually?

D. PROFESSIONAL QUALIFICATIONS

* **Please attach photocopies of all your college transcripts. Should you be offered a position, official copies of your college transcripts may be required to be submitted for inclusion in your personnel file.**

What degree or degrees do you hold?

Degree

Date Received

Issuing Institution

Your major(s): _____

Your minor(s): _____

Cumulative grade point average BA _____ Graduate Work _____

Total _____ units after date of bachelors degree

Sequentially list your teaching experience with the most recent first:

School's Name

Grades or Subjects

Dates

Curriculum Preferences/Experiences? _____ total years teaching experience

Do you have an ACSI Teaching Certificate?

If yes, what level? Remains valid for ____ years.

Do you have a state teaching certificate? State?

What kind? Remains valid for _____ years

Endorsement(s) List semester hours in endorsement area(s).

If you do not hold a certificate, what requirements do you lack?

- **Please attach photocopies of any certificates held. If you are a recent graduate please attach several student teaching evaluations.**

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Do you hold certificates for CPR? First Aid? Others? Please list them and their expiration dates.

E. PERSONAL PHILOSOPHY

* On a separate paper please label and succinctly answer in one or two paragraphs each of the questions below.

1. Why do you wish to teach in a Christian school?
2. What do you consider to be the best classroom atmosphere for learning?
3. What is your philosophy of discipline?
4. What areas do you feel are your strengths? Weaknesses?

F. EMPLOYMENT HISTORY

Please start with your current or most recent employer and work backwards for the past five years. If necessary, you may make copies of this page or use the reverse side.

Employer _____

Position _____ Dates of Employment _____

Address _____

Supervisor's Name & Phone Number _____

Reason for Leaving _____

Employer _____

Position _____ Dates of Employment _____

Address _____

Supervisor's Name & Phone Number _____

Reason for Leaving _____

Employer _____

Position _____ Dates of Employment _____

Address _____

Supervisor's Name & Phone Number _____

Reason for Leaving _____

Have you ever worked under a different name for any of the employers you have listed? If so, what was the name or names? _____

Have you already signed a contract for next year with any other institution? _____

G. PERSONAL REFERENCES

You will need to sign the Reference Release Form that is attached and return it with this application. Do not list family members or relatives for references.

Give two references that are qualified to speak of your spiritual experience and Christian service. List your current pastor first.

Name – Complete Address	Phone	Position
1. _____		

2. _____		

Give three references that are qualified to speak of your professional training and experience. List your current or most recent principal or supervisor first.

Name – Complete Address	Phone	Position
1. _____		

2. _____		

3. _____		

AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I have made application for a position as a _____ with Grace Covenant Academy. I have authorized the school to thoroughly investigate references, work records, evaluations, education, and other matters related to my suitability for employment. I authorize references and my former employers to disclose to the school any and all employment records, performance reviews, letters, reports, and other information related to my life and employment, without giving me prior notice of such disclosure. In addition, I hereby release the Grace Covenant Academy, my former employers, references, and all other parties from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. I waive the right to ever personally view any references given to Grace Covenant Academy. I certify that I have carefully read and do understand the above statements.

_____ Applicant's Signature	_____ Social Security Number
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H. APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that Grace Covenant Academy does not discriminate in its employment practices against any person because of race, color, national or ethnic origin, gender, age, or disability.

I hereby certify that the facts set forth in this initial application are true and complete to the best of my knowledge. I understand that discovery of falsification of any statement or a significant omission of fact may prevent me from being hired, or if elapsed before discovery. If I am released under these circumstances, I further understand that I will be paid and receive benefits only through the day of release.

I authorize Grace Covenant Academy to thoroughly investigate references, work records, evaluations, education, and other matters related to my suitability for employment.

I authorize references and my former employers to disclose to the school any and all employment records, performance reviews, letters, reports, and other information related to my life and employment, without giving me prior notice of such disclosure.

In addition, I hereby release the Grace Covenant Academy, my former employers, references, and all other parties from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

I waive the right to personally view any references given to Grace Covenant Academy.

Since I will be working with children, I understand that I must submit to a fingerprint check by the FBI and possibly other federal and state authorities. I agree to fully cooperate in providing and recording as many sets of my fingerprints as necessary for such an investigation. I authorize Grace Covenant Academy to conduct a criminal records check. I understand that this is only an application for employment and that no employment contract is being offered at this time. I certify that I have carefully read and do understand the above statements.

Signature of Applicant

Date

Declaration of Ethical and Moral Integrity

As an applicant for employment or for a volunteer position at Grace Covenant Academy and its ministries, I, _____ recognize, understand, and agree to live by the moral and ethical standards of the school. I further declare that with regard to my personal moral and ethical character and conduct as of this date, I am not, nor have been in the past engaged in inappropriate conduct toward minors, nor do I have inclinations toward such conduct. Inappropriate conduct includes the following: homosexuality, verbal, physical or sexual abuse as defined by Scripture and state law. I do declare that the above statement is factual and true. By affixing my signature, I declare that I meet the moral and ethical standards of Grace Covenant Academy.

Applicant's Signature

Date

Administrator's Signature
(after discussion with applicant)

Date

If yes, please explain (attach a separate page if necessary): _____

Were you a victim of abuse or molestation while a minor? YES _____ NO _____ UNSURE _____

Have you ever been convicted of, been accused of or practiced homosexuality? YES _____ NO _____

If yes, please explain (Attach a separate page if necessary): _____

Have you ever been convicted of a criminal offense? YES _____ NO _____ If yes, please explain.

(Attach a separate page if necessary): _____

(Continue on back of page)

PERSONAL REFERENCES

Name: _____

Address: _____

City, State & Zip: _____

Telephone: _____

Name: _____

Address: _____

City, State & Zip: _____

Telephone: _____

Name: _____

Address: _____

City, State & Zip: _____

Telephone: _____

BACKGROUND INFORMATION CONSENT FORM

APPLICANT AUTHORIZATION AND RELEASE FORM

GRACE COVENANT CHURCH AND ACADEMY, CORNELIUS, NC

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information including opinions that they may have regarding my character and fitness for children/youth work. In consideration of the receipt and evaluation of this application by Grace Covenant Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other organization, including record custodians, both collectively and individually, from any liability for damages of whatever kind or nature which may at any time result to me, my heirs or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the bylaws and policies of Grace Covenant Church and the International Church of the Foursquare Gospel and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement that I have read and understand.

I also hereby authorize Grace Covenant Church and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment/service now and, if applicable, during the tenure of my employment/service with Grace Covenant Church.

These above mentioned background information checks may include, but are not limited to, employment and education verifications, social security verification, driving record information, personal references, personal interviews and personal credit history. I further understand that an acceptable credit report and/or background check will allow me to continue the pre-employment/service process and that an unacceptable credit and/or background check may result in the discontinuation of my pre-employment/service process. I understand if I am hired/serving prior to the completion of the background check that an unacceptable background check will result in my termination.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any criminal background search prepared on me upon written request within a reasonable time after the date of such search.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Grace Covenant Church including but not limited to any courthouse, any public agency and all law enforcement agencies and any and all credit bureaus regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I release Grace Covenant Church and/or its agents and any persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, of whatever kind, by me, my heirs and others making such claim or demand on my behalf, for procuring, selling, providing, brokering and/or assisting with compilation or preparation of the background information check hereby authorized.

Printed Name in Full

Applicant's Signature

Date

Witness' Signature

Date

REPORTING PROCEDURES FOR CHURCH WORKERS

Each teacher involved in the Youth/Children's Ministry should report any suspicious behavior or comments that would lead an individual to believe that **PHYSICAL ABUSE AND/OR SEXUAL ABUSE** has occurred. The following are indications of possible abuse:

- ◆ **PHYSICAL SIGNS** - lacerations and bruises, nightmares, irritation, pain or injury to genital area, difficulty with urinating, discomfort when sitting, torn or bleeding underclothing, venereal disease
- ◆ **BEHAVIORAL SIGNS** - anxiety when approaching church or nursery area, nervous or hostile behavior toward adults, sexual self-consciousness, "acting out" sexual behavior, withdrawal from church activities
- ◆ **VERBAL SIGNS** - I don't like (particular church worker), (a church worker) does things to me when we're alone, I don't like to be alone with (a church worker), (a church worker) fooled around with me.

If any of these things should take place, a teacher must report what they have seen or heard to the person directly over their department. The department head will then relay that information to the senior pastor. If, in the judgment of the senior pastor, there is any truth to the allegations, he will report these findings to the state within 24 hours. The senior pastor may file the report anonymously from the office of an independent third party if he chooses.

On a periodic basis there will be meetings with teachers to discuss reporting procedures. Everyone involved will know the responsibility that they have to report incidents. If the department you are serving has a policy and procedural manual you are required to read and sign any statement of agreement.

APPLICANT'S STATEMENT

I have read, understand and agree to comply with these reporting procedures.

Signature

Date

Background Check Forms, Cont.

Consumer, Investigative, and Direct Reports Authorization, Disclosure and Release

Name		Social Security no.	Date of birth (mm/dd/yyyy)*
Street address		City	State Zip Code
Driver's license no.	State of issuance	Any other names used	

By signing below, I hereby voluntarily authorize International Church of the Foursquare Gospel d/b/a _____ Grace Covenant Academy: 89289_____ (legal name and code number of church, school, camp) ("Foursquare") to obtain "consumer reports" and "investigative consumer reports" about me from a "consumer reporting agency," and reports Foursquare may obtain directly, and to consider these reports when making decisions regarding my employment/volunteer position or potential position with Foursquare. The nature and scope of these reports are as follows. They may contain information on my character, general reputation, personal characteristics, and mode of living. They may also include, among other things, checks, records and/or information regarding: my criminal convictions (including, without limit, court, sex offender, incarceration and DMV records), social security number, current and prior employer(s)/supervisor(s) and/or references I provided, coworkers, neighbors, friends, associates or acquaintances, and verification of college degrees and professional licenses or certifications.

I understand that I have rights under the Fair Credit Reporting Act (and the California Investigative Consumer Reporting Agencies Act and other California law for California residents, the Government Data Practices for Minnesota residents, the Credit Services Organization Act for Oklahoma residents, the equivalent New York FCRA for New York residents, and the equivalent Maine FCRA for Maine residents) including the rights discussed in the separate disclosure statement(s) provided to me.

I authorize any governmental entity, law enforcement agency, institution, information service bureau, school, employer, supervisor, reference, or other person contacted by Church Volunteer Central (or other selected agency) or Foursquare, or their agents or volunteers, to furnish the information described herein.

I release and discharge from liability all persons, agencies, and entities providing the above information or reports about me to Church Volunteer Central (or other selected agency) and/or Foursquare. To the fullest extent permitted by law, I further release and discharge Foursquare and Church Volunteer Central (or other selected agency), and their agents, employees and volunteers, from any claims, damages, losses, liabilities, costs and/or expense arising from the retrieving and/or reporting of said information, including any consumer report or investigative consumer report.

I acknowledge a copy or telephonic facsimile of this document shall be valid as the original. If I am presently a resident of Maine or New York, I have reviewed the additional state law disclosure information attached.

Signature	Date
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If you would like a copy of any investigative consumer report sent to you at your address listed above, please check the box below.

- Yes, I would like to receive a copy of any investigative consumer report which may be obtained on me by a consumer reporting agency.
- If you would like to receive a copy via email, please provide your email address.

Your date of birth is requested to verify the information obtained is about you and not someone with the same or a similar name. It will not be used for employment purposes.