

DORIS TODD CHRISTIAN ACADEMY

PS - 12

519 Baldwin Avenue

Paia, Hi 96779

808.579.9237 FAX: 808.579.9449

cjmoore@doristoddchristian.org



INITIAL TEACHER APPLICATION

Your interest in Doris Todd Christian 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 notify you and request further information. We will also contact your references. If we have continued interest in your candidacy, we will send you some follow up questions and arrange for a personal interview.

We realize that the key to a successful Christian school is its staff. We are seeking applicants who have a clear testimony of their salvation and faith in Jesus Christ, 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:

Application date:

Date available:

Present Address:

City:

State: ZIP:

Phone: Cell:

E-mail:

B. Marital Status

Married

Single

Engaged

Divorced

Separated

Widow(er)

If divorced, separated, or remarried, please explain:

Spouse's name:

Year's married:

Occupation:

Employer:

List your children names and ages:

C. Position Desired

1. Please list the grades you prefer teaching:
2. Please list subjects you could teach if you are interested in middle or high school grades
3. Position for which you are applying: Full time Part time Substitute
4. Are you a U.S. citizen? Yes No
5. If you are not a U.S. citizen, what kind of documentation can you submit to verify your legal right to work in the US?
6. List co-curricular responsibilities you would be willing to assume:
7. What would you like to be doing five years from now?

D. Christian Background

1. Write your personal Christian testimony.
2. Please carefully read our Statement of Faith and select your degree of support.
 - I fully support the Statement of Faith as written without any mental reservation.
 - I support the Statement of Faith as written except for the area(s) listed and explained in a separate document.
 - I do not support the Statement of Faith.

3. 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
4. What church do you attend?
5. How long have you been attending this church:
6. What is your denominational preference?
7. Are you a member at your church? Yes No
If not, please explain/elaborate:
8. In what church activities are you involved and with what degree of regularity?
9. What other Christian service have you done since becoming a Christian?
10. Have you taught a Bible class? Yes No
11. To what extent do you believe you should become involved in ministries of the church you attend?
12. Describe your routine of personal Bible study and prayer.
13. What books have you read recently that have helped you spiritually?
14. How did they help you grow spiritually?
15. What is your attitude toward working with those of other denominational beliefs?

E. Professional Qualifications

1. Attach copies of all your college transcripts. Should you be offered a position, official copies of your transcripts must be provided to the school.
2. Your degree information:
 - a. Degree:
 - b. Date received:
 - c. College/University:
 - d. City, State:

e. Major and Minor(s):

3. If you have another Degree, list it here:

a. Degree:

b. Date received:

c. College/University:

d. City, State:

e. Major and Minor(s):

4. Number of full years of teaching experience at a Christian school:

5. Number of full years of teaching experience at a public school:

6. List your **Classroom Teaching Experience** with most recent place first. Do not list student teaching.

SCHOOL

City , State

Grades/Subjects

M/YY to M/YY

SCHOOL

City, State

Grades/Subjects

M/YYtoM/YY

SCHOOL

City , State

Grades/Subjects

M/YY to M/YY

7. List any other educational advantages that you have had including opportunities for travel.

8. Do you have an **ACSI Teaching Certificate**? Yes No

Type:

Level:

Date of expiration:

9. Do you have a state teaching certificate? Yes No

State: Type:

Date of expiration:

Attach copies of any certificates held.

10. Have you had a course in Philosophy of Christian Education? Yes No

If yes, where and when?

11. If you have had other courses giving specific training for Christian schools, please list and describe.

12. List any conferences or seminars that you have led or participated in within the last three years.

13. Describe how teacher evaluation has been helpful to you.

14. Are you under contract for the ensuing year? Yes No

If yes, when does your contract expire?

15. List any books or articles that you have read recently that have helped you to grow professionally.

F. Personal Philosophy:

Answer the following questions with one or two brief paragraphs.

1. Why do you wish to teach in a Christian school?

2. What are the main characteristics that distinguish a Christian school from a public school?

G. REFERENCES

Personal References

Give references that are qualified to speak of your **spiritual experience and Christian service**. List your pastor first. Do not list family members or relatives.

1. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

2. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

3. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

Professional References

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

4. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

5. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

6. Name:

Position:

Organization:

Address:

City:

State:

Zip:

Phone:

Em

Email:

Sign the following two pages using your Digital Signature and email to cjmoore@doristoddchristian.org OR sign the following two pages and send by FAX or mail to:

Carolyn Moore
Head of School
Doris Todd Christian Academy
519 Baldwin Avenue
Paia, HI 96779

FAX 808.579.9449

APPLICANT'S CERTIFICATION AND AGREEMENT

My answers on this application and any resume I provide are complete and true. I understand that the submission of any false or incomplete information in connection with my application, whether on this or other documents or in interviews, will be cause for the rejection of my application or the termination of my employment at any time. I understand that falsification of any statement or significant omission of fact may prevent me from being hired, or if hired may subject me to immediate dismissal regardless of the time elapsed before discovery. If I am released under these circumstances, I further understand and agree that I will be paid and receive benefits only through the day of release.

I authorize **Doris Todd Christian Academy** to interview thoroughly the primary references, which I have listed, any secondary references mentioned through interviews with primary references, or other individuals who know me and have knowledge regarding my testimony and work record. I also authorize the school to investigate thoroughly my work records and evaluations, my educational preparation, and other matters related to my suitability for the position.

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 school, 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 the school.**

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 are necessary for such an investigation. I authorize the school to conduct a criminal records check. I understand and agree that any offer of employment that I may receive from the school is conditioned upon the receipt of background information, including criminal background information. The school may refuse employment or terminate conditional employment if the school deems any background information unfavorable or that it could reflect adversely on the school or on me as a Christian role model.

I understand that this is only an application for employment and that no employment contract is being offered at this time.

I understand that **Doris Todd Christian Academy** does not discriminate in its employment practices against any person because of race, color, national origin, gender, protected age category, or qualified disability.

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

Applicant's Name (print) _____

Signature _____ Date _____

AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I have made application for a position as a _____ with Doris Todd Christian Academy. I have authorized the school to thoroughly interview the primary references which I have listed, any secondary references mentioned through interviews with primary references, or other individuals that know me and have knowledge regarding my testimony and work record. I also authorize the school to thoroughly investigate my work records and evaluations, my educational preparation, and all 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 Doris Todd Christian 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, including but not limited to defamation of character or invasion of privacy, that might arise from responding to this reference request.

I waive the right to ever personally view any references given to Doris Todd Christian Academy.

I agree that a photocopy or facsimile copy of this document and any signature shall be considered for all purposes as the original signed release on file.

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

Applicant's Name (Print): _____

Applicant's Signature: _____ Date: _____