

GORMAN CHRISTIAN ACADEMY AND EARLY LEARNING CENTER

A Ministry of Gorman Baptist Church

www.gormanchristian.org

3311 East Geer Street

Durham, North Carolina 27704

(919) 688-2567

Your interest in Gorman Christian Academy and Early Learning Center is appreciated. We invite you to fill out this application and return it to our school office. If an opening occurs for which it appears you may qualify, we will contact you at that time. We may also contact your references.

We realize 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: _____

Application Date: _____ Date Available: _____

Present Address: _____

(P. O. Box) (Street)

(City) (State) (Zip Code)

Daytime Telephone: _____ Evening Telephone: _____

Best time to call you? _____ Social Security Number: _____

How long have you lived at the above address? _____

Permanent Address _____

if different than (P. O. Box) (Street)

present

(City) (State) (Zip Code)

Telephone: _____

NC Driver License Number: _____ Date of Birth: _____

B. POSITION DESIRED

1. Please indicate your teaching level preference (Preschool, Elementary, Middle School, After School, Summer Program) by placing 1, 2, 3, etc. in the parenthesis. Then to the right, indicate the type of position you are applying for (teacher, assistant, etc.).

Preschool: _____

2 year olds

3 year olds

4 year olds

Elementary: _____

Kindergarten

First Grade

Second Grade

Third Grade

Fourth Grade

Fifth Grade

Middle School: _____

Sixth Grade

Seventh Grade

Eighth Grade

After School Program

Summer Program

Full Time

Part Time

Substitute

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

3. Special Abilities: Please list any activities or clubs which you would be capable of and be willing to direct, sponsor, or advise.

4. Future Plans: What would you like to be doing five years from now?

C. PROFESSIONAL QUALIFICATIONS

GED High School Graduate Years of College Completed _____

What degree or degrees do you hold?

Degree	Date Received	Institution

Your major(s) in college: _____

Your minor(s) in college: _____

Cumulative Grade Point Average: _____ Years of Graduate Work: _____

D. TEACHING EXPERIENCE

1. Sequentially list your teaching experience with most recent first.

Name of School	Grades or Ages	Dates

2. Child Care Training you have completed in the past year (First Aid, CPR, etc.). List dates of training.

Child Care Training	Dates of training

3. To what degree are you familiar with various Christian or secular curriculums (i.e. ACSI, A Beka, Bob Jones, etc.)?

--

E. EMPLOYMENT HISTORY (Please start with your current or most recent employer.)

1. Employer:			
Position:		Supervisor's Name:	
Address:		Phone:	
No. Supervised by you:	Date Employed:		Date Separated:
Starting Salary	Ending Salary	May we contact your employer?	
Duties			
Reason For Leaving:			

2. Employer:			
Position:		Supervisor's Name:	
Address:		Phone:	
No. Supervised by you:	Date Employed:		Date Separated:
Starting Salary	Ending Salary	May we contact your employer?	
Duties			
Reason For Leaving:			

3. Employer:			
Position:		Supervisor's Name:	
Address:		Phone:	
No. Supervised by you:	Date Employed:		Date Separated:
Starting Salary	Ending Salary	May we contact your employer?	
Duties			
Reason For Leaving:			

4. Employer:			
Position:		Supervisor's Name:	
Address:		Phone:	
No. Supervised by you:	Date Employed:		Date Separated:
Starting Salary	Ending Salary	May we contact your employer?	
Duties			
Reason For Leaving:			

F. PERSONAL REFERENCES

1. Please list three references that we may contact who are qualified to speak of your professional training and experience.)

NAME	POSITION	PHONE

2. Please list three references that we may contact who are qualified to speak of your personal character and/or of your Christian service. Please do not list relatives.

NAME	POSITION	PHONE

G. PERSONAL PHILOSOPHY

1. Summarize your salvation experience.

2. Why do you wish to teach or work in a Christian school?

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

4. What can you personally contribute to Gorman Christian Academy?

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions and former employers to disclose to the school any and all employment records, performance reviews, letters, reports, and other information related to my employment, without giving me prior notice of such disclosure. I authorize investigation of all statements made in this application and understand that false information of documentation or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action, or any dismissal if I am employed, and/or criminal action. I further understand that dismissal upon employment shall be mandatory if fraudulent disclosures are given to meet position qualifications.

Signature of applicant

Date