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| **APPLICATION** |
| **Full Legal Name:**  |  **M F** |
| **Preferred Name or Nickname:** | **Birthday: / /** | **Age:** |
| **Drivers License Number:** | **Desired Position:** |
| **Cell Ph.** | **E-mail:** |
| **Address:** | **City, State, ZIP:** |
| **Emergency Contact:**  | **Phone Number:**  |
| **CHURCH MEMBERSHIP***Director and Administrative Assistant must be good standing members of Bible Baptist Church of DeQuincy. Teachers and aides must be members of a church of like faith and doctrine. We reserve the right to validate all information with current pastor.* |
| **Home Church:** | **City, State, ZIP:** |
| **Pastor:**  | **Phone Number:** |
| **TESTIMONY OF SALVATION** *In an effort to promote the fellowship of likeminded individuals, and secure the Biblical truths that are taught in or school and church, please state your testimony of salvation below.*  |
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| **EMPLOYMENT HISTORY** |
| **Place of Employment:** |  | **Place of Employment:** |
| **Name of Employer:** | **Name of Employer:** |
| **City, State, ZIP:** | **City, State, ZIP:** |
| **Phone Number:** | **Phone Number:** |
| **Dates Employed:** |  | **Dates Employed:** |
| **Duties:** |  | **Duties:** |
|  |  |  |
|  |  |  |
|  |  |  |
| **Reason for Leaving:** |  | **Reason for Leaving:** |
|  |  |  |
| **May we contact this employer?** |  | **May we contact this employer?** |
| **EDUCATION HISTORY** |
| **Name of School or University:** |  | **Name of School or University:** |
|  |  |
| **City, State, ZIP:** | **City, State, ZIP:** |
| **Focus of Study:** | **Focus of Study:** |
| **Dates Attended:** |  | **Dates Attended:** |
| **Degree Earned:** |  | **Degree Earned:** |

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| **PROFESSIONAL REFERENCES** |
| **Name:** |  | **Name:** |
| **Relationship:** |  | **Relationship:** |
| **Job Title:**  | **Job Title:**  |
| **Place of Employment:** |  | **Place of Employment:** |
| **Phone Number:** |  | **Phone Number:** |
| **Email:** |  | **Email:** |

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| **Name:** |  | **Name:** |
| **Relationship:** |  | **Relationship:** |
| **Job Title:**  | **Job Title:**  |
| **Place of Employment:** |  | **Place of Employment:** |
| **Phone Number:** |  | **Phone Number:** |
| **Email:** |  | **Email:** |

I hereby authorize Bible Baptist Academy contact the references provided. I grant Bible Baptist Academy, the education board of Bible Baptist Church, and its affiliates to perform a background check and grant them access to my record. I have read and understood the components of the contract and handbook and without conflict, will teach and enforce the rules, policies, doctrine, and beliefs as they have been stated.

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| **Applicant Signature**  |  | **Date** |