

For Office Use Only

Date of Hire: _____

Southwest Christian Academy

11301 Geyer Springs Road
Little Rock, Arkansas 72209
Phone (501) 565-3276
Fax (866) 394-4967

Date: _____

APPLICATION FOR EMPLOYMENT

Southwest Christian Academy does not discriminate against any employee or applicant for employment on the basis of age, race, color, and national and/or ethnic origin.

Please print or type
Position Requested _____

Available to work: _____ Part time _____ Substitute _____ Full Time

Date Available: _____

PERSONAL

Name: _____

Address: _____

Email address _____

Telephone: Daytime _____ Evening _____

Date of Birth: _____ Social Security Number: _____

Someone who will always know your address, besides your spouse:

Have you ever been employed by Little Rock Public Schools? _____

Have you ever filed an application with Little Rock Schools? _____

Have you ever been convicted of a felony? _____ If yes, describe in full _____

Are you legally eligible for employment in the United States? _____

Do you have any impairment, physical or mental, which would interfere with your ability to perform the duties of the position(s) for which you have applied? _____

If yes, describe in full _____

TEACHER APPLICANTS

Do you have an Arkansas Teaching Certificate? _____ If yes, be specific as to what areas and grade level. _

If you do NOT have an Arkansas Teaching Certificate, will you qualify for one prior to your available date to begin? _____

EDUCATION

Elementary School _____
 Name of School Address Years attended Graduated?

Secondary School _____
 Name of School Address Years attended Graduated?

Undergraduate Work: (Attach a copy of transcript/s)

 Name of School Address Years attended Major / Minor Graduated?

 Name of School Address Years attended Major / Minor Graduated?

List activities outside the classroom in which you participated actively while attending college? _____

Graduate work: Attach a copy of transcript (s)

 Name of School Address Years attended Major / Minor Graduated?

EMPLOYMENT HISTORY – TEACHING EDUCATION / ADMINISTRATION ONLY

Dates taught	Years taught	Position Teacher / Principal	Name of school and address and Phone number	Grades / Subjects	Annual Salary	Reason for leaving

References:

Pastor's Name: _____ Phone: _____

Most Recent Supervisor: _____ Phone: _____

Work / Personal Reference: _____ Phone: _____

Name of a Southwest Christian Academy Employee or teacher (if available) _____

EMPLOYMENT HISTORY – ALL OTHER

Please give accurate, complete full time and part time employment record. Start with your most recent employer

Company Name	Telephone
Address	Employed from _____ to _____
Name of Supervisor	Weekly Pay Starting _____ Ending _____
State Job Title and Describe your Work	Reason for leaving

Company Name	Telephone
Address	Employed from _____ to _____
Name of Supervisor	Weekly Pay Starting _____ Ending _____
State Job Title and Describe your Work	Reason for leaving

Company Name	Telephone
Address	Employed from _____ to _____
Name of Supervisor	Weekly Pay Starting _____ Ending _____
State Job Title and Describe your Work	Reason for leaving

Company Name	Telephone
Address	Employed from _____ to _____
Name of Supervisor	Weekly Pay Starting _____ Ending _____
State Job Title and Describe your Work	Reason for leaving

PERSONAL VIEW

How long have you had assurance that Christ is your personal Lord and Savior? _____

Please describe your present relationship with the Lord. _____

Denominational Preference: _____

Church presently attending: _____ What church activities are you involved in, and to what degree of regularity: _____

What do you believe about the origin of man? _____

Have you recognized any leading of the Lord in your life toward Christian teaching? _____

If so, describe _____

Would you want your children to be educated in a Christian school? State reasons, even if you do not presently have children. _____

Child #1 _____ Age _____ Grade _____

Child #2 _____ Age _____ Grade _____

Child #3 _____ Age _____ Grade _____

Child #1 _____ Age _____ Grade _____

Do you use alcohol or tobacco in any form? _____

Please give your personal attitude as a Christian toward liquor, tobacco and matters of recreation and entertainment _____

STATEMENT OF FAITH

This is the statement of faith of our school. If it is the statement of your basic Christian convictions also, please indicate this by your signature. If at any point you disagree, please state your viewpoint.

DOCTRINAL STATEMENT

1. We believe the Bible to be the inspired, the only infallible, authoritative Word of God.
2. We believe that there is one God, eternally existent in three persons: Father, Son and Holy Spirit.
3. We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father and in His personal return to power and glory.
4. We believe that for salvation of the lost and sinful men, regeneration by the Holy Spirit is absolutely necessary.
5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a Godly life.
6. We believe in the resurrection of both of the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.
7. We believe that heaven and hell are definite places.
8. We believe in Spiritual unity of believers in our Lord Jesus Christ.

I have read and agree with the above Statement of Faith.

Signature: _____