



## COASTAL CHRISTIAN ACADEMY PRESCHOOL APPLICATION FOR EMPLOYMENT

TODAY'S DATE:			
PERSONAL INFORMATION			
Legal Name:First	N di alalla		
FIRST	Middle	Las	I
Address: Street	City	State	Zip
Email address:	·		۲
Home Phone:			
Current Employer:	Position	n Held:	
Have you applied to CCA in the past?Yes  If yes, when/what position?			
APPLICATION INFORMATION			
Preschool Position Desired: Director		Teacher	Aide
Age preference (check all that apply): 2yr	3yr	4yr	5yr
Date available to begin work:			
Do you have any vacation/time off anticipated with	nin 90 days of hire:	Yes	_No
If yes, please explain and include dates if possible:			

## **EDUCATIONAL BACKGROUND**

All teaching applicants need to have adequate Early Childhood Education units; applicants for a Director's position must have additional units specifically for Director (Administration of Early Childhood Programs or Supervision of Early Childhood Programs). All applicants need to provide an unofficial or official college transcript along with their application.

	School Name	Years Attended	GPA	Degree Earned
High School				
College				
Number of Earl	y Childhood Education units comple	ted:	units	
Skills and qualit	fications: (licenses, skills, training, aw	vards, etc. )		
				<del>-</del>
TEACHING WO	RK EXPERIENCE: Please list teaching	related work experience,	beginning with th	e most recent:
1. Employer:		Ph	one:	
Address:				
Position Held a	nd/or Title:			
Supervisor Nan	ne:	Dates er	nployed:	to
Reason for Leav	ving:			
2. Employer:		Ph	one:	
Address:				
Position Held a	nd/or Title:			
Supervisor Nan	ne:	Dates er	nployed:	to
Reason for Leav	ving:			

3. Employer:	Phone:	
Address:		
Supervisor Name:	Dates employed:	to
Reason for Leaving:		
OTHER WORK EXPERIENCE		
Employer:	Position Held:	
Dates employed:	to Reason for Leaving:	
Employer:	Position Held:	
Dates employed:	to Reason for Leaving:	
	any offense involving dishonesty, breach of trust, child abuse	
	140	
REFERENCES All applicants must sign the Applicants must sign the Applicants must sign the Application sheet included with the	cant's Certification and Agreement as well as the Authorizat this application. Below, please provide two personal reference thristian service. You may include your pastor, home fellowshes or relatives as references.	ion to Release Reference es who are qualified to
1. Name:	Relationship:	
Fmail:	Phone Number:	

2. Name:	Relationship:
Email:	Phone Number:
private school:	you desire to teach/work at a Christian Preschool vs. a public or other type of
CHRISTIAN BACKGROUND	How long have you attended?
	Current involvement in your church?
SPIRITUAL COMMITMENT STATEMENT	
The ministry of Coastal Christian Academ	y is to biblically disciple students and subsequently form their character – our
goal is to reinforce the students' relation	ship with Jesus Christ. To accomplish this, CCA seeks people who will be role
models of the Christian life and who are a	able to read, teach and reinforce biblical principles.
I declare that my life-style currently refle	cts the biblical standards, as taught in Scripture, with respect to personal moral
conduct and integrity, which is also uphe	ld by Coastal Christian Academy. I understand that if, at any point in time, my
life-style contradicts these standards it co	ould result in suspension or termination of my employment.
Name (please print)	Date
Signature (please sign)	

## APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that Coastal Christian Academy does not discriminate in its employment practices against any person because of gender, race, color, national or ethnic origin, 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 significant omission of fact during any phase of the hiring process may prevent me from being hired or, if hired, may subject me to immediate dismissal. If I am released under these circumstances, I further understand that I will be paid and receive benefits only through the day of release.

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 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 any and all background information, including proof of legal authority to work in the United States. The school may refuse employment or terminate conditional employment if the school deems any background information unfavorable or to reflect adversely on the school or 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 further certify that I have carefully read and do understand the above statements.

Name (please print)	Date	
Signature (please sign)		

## **AUTHORIZATION TO RELEASE REFERENCE INFORMATION**

I have made application for a position with Coastal 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 which 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 Coastal Christian Academy to contact my personal and former employment references for the purpose of obtaining information regarding my ability to fulfill the requirements of the position I am applying for.

In addition, I hereby release Coastal 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.

I waive the right to ever personally view any references given to Coastal 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 under	rstand the above statements.	
Name (please print)	Date	

Signature (please sign)