

# GROVE CITY CHRISTIAN ACADEMY

*Be transformed by the renewing of your mind. Romans 12:2*

301 N. Madison Avenue, Grove City, PA 16127

Phone 724-458-5253, Fax 724-458-5259, e-mail: office@GroveCityChristianAcademy.com

## TEACHER APPLICATION

(Please type or print)

### I. PERSONAL DATA

DATE OF APPLICATION \_\_\_\_\_ AREA OF QUALIFICATION \_\_\_\_\_

NAME \_\_\_\_\_ SEX \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE (Home) \_\_\_\_\_

\_\_\_\_\_ PHONE (Work) \_\_\_\_\_  
City State

MARITAL STATUS \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_ SPOUSE'S EMPLOYMENT \_\_\_\_\_

CHILDREN:	NAME(S)	DATE OF BIRTH	GRADE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHURCH YOU ATTEND \_\_\_\_\_ DENOMINATION \_\_\_\_\_

DO YOU ATTEND REGULARLY? \_\_\_\_\_ ARE YOU A MEMBER? \_\_\_\_\_

ARE YOU INTERESTED IN: \_\_\_\_\_ FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ SUBSTITUTE

WHY ARE YOU CONSIDERING A CHANGE OF POSITION AT THIS TIME \_\_\_\_\_

\_\_\_\_\_

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DO YOU HAVE ANY LIMITATIONS WHICH WOULD AFFECT YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING?      \_\_\_\_\_ YES      \_\_\_\_\_ NO      (If "yes", please explain, noting any accommodations which may be necessary.)

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CONDITION OF HEALTH \_\_\_\_\_ DATE AVAILABLE \_\_\_\_\_

ARE YOU A U. S. CITIZEN? \_\_\_ YES \_\_\_ NO-- IF NO, DO YOU HAVE A WORK PERMIT? \_\_\_ YES \_\_\_ NO

1.      HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND/OR SUMMARY OFFENSES? \_\_\_ YES \_\_\_ NO
2.      HAVE YOU EVER BEEN CHARGED WITH CHILD ABUSE? \_\_\_ YES \_\_\_ NO
3.      HAS ANY COURT EVER DETERMINED THAT YOU HAVE COMMITTED ABUSE AGAINST A CHILD? \_\_\_ YES \_\_\_ NO

(IF YOU ANSWERED YES TO ANY OF QUESTIONS 1-3 ABOVE, PLEASE EXPLAIN ON A SEPARATE SHEET OF PAPER AND ATTACH TO THIS APPLICATION)

## II. PRESENT EMPLOYMENT DATA

CURRENT EMPLOYER

\_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
\_\_\_\_\_  
STARTING DATE \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

NAME OF IMMEDIATE SUPERVISOR

\_\_\_\_\_

POSITION HELD \_\_\_\_\_

NATURE OF RESPONSIBILITIES

\_\_\_\_\_  
\_\_\_\_\_

## III. EDUCATION DATA

HIGH SCHOOL (name, location, date of diploma) \_\_\_\_\_

\_\_\_\_\_

COLLEGES or UNIVERSITIES (name, location) \_\_\_\_\_

\_\_\_\_\_

MAJOR(S) \_\_\_\_\_

MINOR(S) \_\_\_\_\_

DEGREE and DATE OF GRADUATION \_\_\_\_\_

(Please include a copy of your diploma)

GRADUATE (university, location)

\_\_\_\_\_

HOURS TAKEN \_\_\_\_\_

DEGREE(S) and DATE(S) OF GRADUATION \_\_\_\_\_

#### IV. TEACHING EXPERIENCE DATA

Name and Location of	Was This a	Grade(s) and/or	Number of	Dates
School(s) in Which You Have Taught	Christian School?	Subject(s) You Taught	Years You Taught	You Taught
(Most Recent First)			There	There

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#### V. OTHER EXPERIENCE DATA

Please list other experiences which you feel strengthen your application. Begin with the most recent experience, and proceed in reverse chronological order.

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#### VI. RECOGNITION DATA

Please list any honor, areas of achievement, or special recognition.

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## **VII. TEACHING CERTIFICATE DATA**

Please list any teaching certificates you hold or have held, and the date(s) of expiration.

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## **VIII. MEMBERSHIP DATA**

Please list professional or social organizations to which you belong.

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## **IX. PERSONAL INTEREST DATA**

Please list areas of school life where you feel you may have a personal interest, as well as activities and hobbies that you enjoy.

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## **X. QUESTIONS FOR PERSONAL RESPONSE**

Please respond to the following on a separate sheet of paper.

1. Give a concise but adequate statement of your faith in Jesus Christ.
2. Give a statement of your philosophy of Christian education.
3. Grove City Christian Academy teaches a world and life view from a Reformed theological perspective.

Briefly explain your world and life view and what Reformed theology means to you.

4. How do you view discipline in a Christian school?
5. What is the essence of your responsibility to the parents of your students?
6. Why do you desire to teach in a Christian school, and particularly at GCCA?
7. What do you believe are your strengths and weaknesses?
8. Other than the Bible, which books have most influenced your thinking?
9. List the titles of the books you have read recently?

## XI. REFERENCE DATA

Please provide the names, addresses, and telephone numbers of five different individuals from whom you have received permission for us to contact them for references. You should provide a different name for each of the following categories of relationship to you:

The pastor of the church to which you currently belong.

A college professor that you had for education classes.

A peer.

An adult female (not a relative) who knows you well with regard to your character and personality.

An adult male (not a relative) who knows you well with regard to your character and personality.

a. \_\_\_\_\_  
Name Phone (Day) Phone (Night)

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Address Relationship to You

b. \_\_\_\_\_  
Name Phone (Day) Phone (Night)

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Address Relationship to You

c. \_\_\_\_\_  
Name Phone (Day) Phone (Night)

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Address Relationship to You

d. \_\_\_\_\_  
Name Phone (Day) Phone (Night)

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Address Relationship to You

e. \_\_\_\_\_  
Name Phone (Day) Phone (Night)

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Address Relationship to You

I CERTIFY that the answers provided by me herein are, to the best of my knowledge and belief, true and correct without reservation. I further affirm that I have not knowingly withheld any facts or circumstances that would detrimentally affect this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date