

Isaac Newton Christian Academy

Linn Christian Education Association

EMPLOYMENT APPLICATION

(Non-Certified Positions)

Answer each question fully and accurately. Please print or type. Date: _____

Last Name		First Name		Middle name	
Address		Street		City	
				State	
				Zip	
Telephone Home			Work		Email Address:
Position applying for:			Salary Requirement:		
Date available for employment: _____					
Are you seeking: <input type="checkbox"/> Regular <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer only					

How did you hear about this position? *Please specify:* _____

Do you have any relatives currently on staff or on the board of directors? YES NO

If yes, give name(s) and relationship(s): _____

Are you 18 years of age or older? YES NO

Have you filed an application here before? YES NO If yes, when? _____

Are you on a lay-off and subject to recall? YES NO

Have you ever been convicted of anything other than a minor traffic violation? YES NO

If yes, please give the date, place and nature of the charge of which you were convicted. (A conviction will not necessarily disqualify you from employment.) _____

Applicants are required to furnish proof of identity and eligibility to work in the United States prior to hire.

Are you physically and mentally able to perform the essential functions of the position for which you are applying?

YES NO If no, please describe in full:

Have you worked or attended school under any other name? YES NO

If yes, give name(s): _____

EDUCATION

School and Location	Major	Diploma/Degree	Graduated (yes/no)
High School			
College			
Other			

EMPLOYMENT EXPERIENCE

PLEASE COMPLETE THIS SECTION **EVEN IF YOU PLAN TO ATTACH A RESUME.** List your last three employers, beginning with the most recent. Account for all periods of time including military service and periods of unemployment.

May we check with your present employer for a reference? YES NO N/A

Name and Address of Employer	Dates Employed	Duties Performed
Telephone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	

Job Title: _____ Status: Full-time Part-time Temporary

Supervisor's Name: _____

Reason for leaving: _____

Name and Address of Employer	Dates Employed	Duties Performed
Telephone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	

Job Title: _____ Status: Full-time Part-time Temporary

Supervisor's Name: _____

Reason for leaving: _____

Name and Address of Employer	Dates Employed	Duties Performed
Telephone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	

Job Title: _____ Status: Full-time Part-time Temporary

Supervisor's Name: _____

Reason for leaving: _____

SKILLS AND QUALIFICATIONS

Please list any other skills, training, qualification, or military experience you may have for this position: _____

STATEMENT OF APPLICANT'S CHRISTIAN FAITH

Because of the unique nature of our educational ministry, we are concerned that our employees be committed to the Christian perspective as explained in our Statement of Faith. All of our employees are involved in times of prayer for the specific needs of our constituents and the school. They may also actively participate in devotions and chapel services.

To help us evaluate our compatibility, please take a moment to provide the following information. Thank you for sharing with us.

Your present church –

Name of Pastor: _____

Name of your church: _____

Address: _____

Please provide a statement of your personal testimony of faith in Christ. Attach an additional page if necessary.)

REFERENCES

List those familiar with your job performance, personal characteristics and spiritual commitment who have known you a **MINIMUM OF ONE YEAR. DO NOT LIST RELATIVES.**

Note: A job offer may be contingent upon acceptable references.

Name	Years Known	Relationship	Organization	City, State	Home & Business Phone Number
Supervisor reference					H: B:
Personal reference					H: B:
Christian reference					H: B:
Other reference					H: B:

STATEMENT OF FAITH

Please sign the Statement of Faith below if you agree with it without reservation. If you disagree with any point, please state your viewpoint. (Attach an additional page if necessary.)

STATEMENT OF FAITH OF THE LINN CHRISTIAN EDUCATION ASSOCIATION

This school is an independent, evangelical Christian organization whose doctrinal position is summarized in our statement of faith:

1. **We believe** the Bible to be divinely inspired and the only infallible, inerrant, and authoritative written Word of God.
2. **We believe** that there is one God, infinitely perfect and eternally existent in three persons: Father, Son, and Holy Spirit.
3. **We believe** in the deity of our Lord Jesus Christ, His virgin birth, His sinless life, His miracles, His vicarious and atoning death through His shed blood, His bodily resurrection, His ascension to the right hand of the Father, and His personal return in power and glory.
4. **We believe** in the fall of man, that all have sinned and come short of the glory of God, and that all human beings are born with a sinful nature.
5. **We believe** that regeneration by the Holy Spirit is absolutely essential for the salvation of lost and sinful men.
6. **We believe** in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life.
7. **We believe** in the bodily resurrection of both the saved and the lost; they that are saved unto the resurrection of eternal life and they that are lost to the resurrection of eternal damnation.
8. **We believe** in the spiritual unity of all believers in our Lord Jesus Christ, no matter to which Bible-believing church they belong, ever seeking together to become more and more in every way like Christ who is the head of His body, the church.
9. **We believe** that salvation is entirely by grace, through one's personal faith in the person and finished work of Jesus Christ upon the cross.

A list of biblical passages supporting the various points in the Statement of Faith is available in the school office.

Without mental reservation, I hereby subscribe to the above statements.

Signature

Date

PLEASE READ CAREFULLY BEFORE SIGNING

I, (print name) _____, certify that all information provided in this application and any attachments is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment, or, if I am hired, may result in my dismissal from employment if discovered at a later date.

I authorize the Linn Christian Education Association to request investigative reports from consumer, law enforcement, and other agencies. These reports may include information as to my character, reputation, personal characteristics, criminal offenses, and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the reporting agencies so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I also understand that a pre-employment physical, drug test, and fingerprinting may be required.

I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and that my employment may be terminated at any time, with or without cause and with or without notice. I understand that no employee or representative of the Linn Christian Education Association, other than the President or his or her designee, has any authority to enter into any agreement for employment for a specified period of time or to make any agreement contrary to the foregoing. Further, the President or his or her designee may not alter the at-will nature of the employment relationship unless done so specifically and in writing.

I voluntarily provide the following information to enable the above-described actions to be undertaken; and I have read, understand, and consent by my signature to these statements.

Have you ever been convicted of a crime? YES NO If yes, please describe. _____

Conviction of a crime will not necessarily be a bar to employment. Factors such as age at the time of the offense, type of offense, remoteness of the offense in time, and rehabilitation will be taken into account in determining effect on suitability for employment.

Social Security Number: _____ Driver's License Number: _____ State: _____

Date of Birth: _____

Signature

Date

DISPOSITION OF APPLICATION

Name of Applicant: _____ Date of Application: _____

Position Applied: _____

Hired

(Effective Date: _____)

Hired for a different position

(Specify position and effective date: _____)

Not Hired - Inadequate Qualifications

Not Hired – Other (Explain)

Position Left Unfilled or Eliminated

Applicant Withdrew

Other (Specify: _____)

Responsible Hiring Official: _____ / _____
Signature Print

Application to be kept on file until: _____