

## Master's Academy of Vero Beach

1105 58<sup>th</sup> Avenue, Vero Beach, FL 32966 Phone: 772.794.4655

## **Faculty/Staff Employment Application**

|   |  | Appl        | licant I | nform    | ation   |                 |                            |    |
|---|--|-------------|----------|----------|---------|-----------------|----------------------------|----|
| Full Name:  |  |             |          |          |         |                 | Date:                      |    |
|   | Last   | First       |          |          |         | М.І.            |                            |    |
| Position(s)<br>Desired:   |  |             |          |          |         |                 |                            |    |
| Address:  |  |             |          |          |         |                 |                            |    |
|   | Street Address                                     |             |          |          |         |                 | Apartment/Unit #           |    |
|   | City   |             |          |          |         | State           | ZIP Code                   |    |
| Phone:  |  |             |          | Email    |         |                 |                            |    |
|   | eb Page/ Facebook/<br>witter/MySpace (optional): _ |             |          |          |         |                 |                            |    |
| Are you a ci  | tizen of the United States?                        | YES         | NO       | If no, a | are you | authorized to w | YES<br>√ork in the U.S.? □ | NO |
| Have you e  | ver worked for this company?                       | YES         | NO       | If yes,  | when?_  |                 |                            |    |
| Have you ever been charged with or YES NO convicted of a felony or misdemeanor? |  | _           |          |          |         |                 |                            |    |
| If yes, expla   | in:  |             |          |          |         |                 |                            |    |
|   |  |             | Educ     | ation    |         |                 |                            |    |
| High Schoo  | l:   | <i>A</i>    | \ddress: |          |         |                 |                            |    |
| From:   | To:  | Did you gr  | aduate?  | YES      | NO      | Diploma::       |                            |    |
| College:  |  |             | \ddress: |          |         |                 |                            |    |
| From:   | To:  | Did you gr  | aduate?  | YES      | NO      | Degree:         |                            |    |
| Other:  |  | A           | \ddress: |          |         |                 |                            |    |
| From:   | To:  | Did you gra | aduate?  | YES      | NO      | Degree:_        |                            |    |

Please attach photocopies of all college transcripts. Should you be offered a position, official copies of your college transcripts will be required.

|                 | 11121  |      |      |      |
|-----------------|--------|------|------|------|
| $\Delta \alpha$ | lditic | nnal | Irai | ทเทศ |
|                 |        |      |      |      |

Please list any additional courses, conference, seminars, and/or training you have received or let, pertinent to the position for which you are applying. Educators, please do not list all courses taken for CEUs, only those you consider particularly valuable.

|   | Certifications                                 |  |  |  |
|---|--|--|--|--|
| Please indicate expiration dates and include photocopies. |  |  |  |  |
| ACSI:   | Area/Level/Endorsements:                       |  |  |  |
| State:  | Area/Level/Endorsements:                       |  |  |  |
| Other:  | Area/Level/Endorsements:                       |  |  |  |
| If you hold an expired certificate, what requirements     | s must be achieved to be eligible for renewal? |  |  |  |
|   | Career   |  |  |  |
| ☐ I have read and fully support the Master's Acade        | emy Philosophy of Education.                   |  |  |  |
| Years as a teacher:                                       | Years in Christian Education:                  |  |  |  |
| Years as an administrator:                                | Years in Public Education:                     |  |  |  |
| Curricula used/preferred:                                 | Total years in education:                      |  |  |  |

|                   | Employme                                  | ent Histo         | ry           |                          |  |
|-------------------|---|-------------------|--------------|--------------------------|--|
| Company:          |   |                   |              | Phone:                   |  |
| Address:          |   |                   |              | Supervisor:              |  |
| Job Title:        | Starting S                                | Salary: <u>\$</u> |              | Ending Salary:           |  |
| Responsibilities  | :   |                   |              |                          |  |
| From:             | To:                                       | Reason f          | or Leaving:_ |                          |  |
| May we contact    | your previous supervisor for a reference? | YES               | NO           |                          |  |
| Company:          |   |                   |              | Phone:                   |  |
| Address:          |   |                   |              | Supervisor:              |  |
| Job Title:        | Starting S                                | Salary: <u>\$</u> |              | Ending Salary: <b>\$</b> |  |
| Responsibilities  | :   |                   |              |                          |  |
| From:             | To:                                       | Reason f          | or Leaving:_ |                          |  |
| •                 | your previous supervisor for a reference? | YES               | NO           |                          |  |
| Company:          |   |                   |              | Phone:                   |  |
|                   |   |                   |              | Supervisor:              |  |
| Job Title:        | Starting S                                | Salary: <u>\$</u> |              | Ending Salary: <b>\$</b> |  |
| Responsibilities  | :   |                   |              |                          |  |
| From:             | To:                                       | Reason f          | or Leaving:_ |                          |  |
| May we contact    | your previous supervisor for a reference? | YES               | NO           |                          |  |
|                   | Military                                  | Service           |              |                          |  |
| Branch:           |   |                   | From:_       | To:                      |  |
| Rank at Dischar   | rge:                                      | Type of           | Discharge:   |                          |  |
| If other than hor | norable, explain:                         |                   |              |                          |  |

| Master's Acad  | lemy Position   |
|--|---|
| Please briefly explain why you left, or are considering lear   | ving, your most recent position:                            |
|  |   |
| What do you believe to be your greatest strengths/skills/gwhy? | ifts related to the position for which you are applying and |
|  |   |
| What do you believe to be your greatest weaknesses rela        | ated to the position for which you are applying and why?    |
| Refero   | ences   |
| Please list three professional references.                     |   |
| Full Name:  Company:   | DI.   |
| Address:   |   |
| Full Name:   | Relationship:   |
| Company:Address:   | Phone:  |
| Full Name:   | Relationship:   |
| Company:   | DI.   |
| Address:   |   |

|                                   | Faith                                 |  |
|-----------------------------------|---------------------------------------|--|
| How did you come to Christ?       |                                       |  |
| ·                                 |                                       |  |
|                                   |                                       |  |
|                                   |                                       |  |
| Describe how you have grown       | n in Christ since then.               |  |
|                                   |                                       |  |
|                                   |                                       |  |
| How are you pursuing continu      | ued growth in your Christian walk?    |  |
|                                   |                                       |  |
|                                   |                                       |  |
| What do you believe to be you     | ur spiritual gift(s) and how would th | at gifting be expressed through your ministry in a |
| position at Master's Academy      |                                       |  |
|                                   |                                       |  |
|                                   |                                       |  |
|                                   |                                       |  |
| Please check EACH of the sta      | atements below, only if you are in a  | agreement.   |
| • • • •                           | rt the Master's Academy Statement of  |  |
| Master's Academy website.         | Master's Academy Statement Marris     | age, Family, and Human Sexuality found on the      |
|                                   |                                       |  |
|                                   |                                       |  |
|                                   | Church                                |  |
| Church Home:                      |                                       | From:  |
| City, State:                      |                                       | To:  |
| Senior Pastor:                    |                                       | Phone number:                                      |
| If you have no settle many to the |                                       |  |
| provide this information, as wel  |                                       | h a church other than your current church, you may |
| Church Home:                      |                                       | From:  |
|                                   |                                       | _  |
| Senior Pastor:                    |                                       | Phone number:                                      |

| Interests/Activities  |
|---|
| What are your interests/hobbies?  |
|   |
|   |
|   |
| What activities/organizations are, or have you been, involved in?   |
|   |
|   |
|   |
| What leadership roles, if any, have your held in any of these organizations?  |
|   |
|   |
|   |
| Family Information (optional)   |
| Marital status (check one)  |
|   |
| □ Married □ Single □ Widowed □ Divorced □ Separated   |
| If manyind who are wearing your analysis's many and accountion.   |
| If married, please provide your spouse's name and occupation:   |
|   |
| Names and area of any shildren living in your home.   |
| Names and ages of any children living in your home:   |
|   |
|   |
|   |
| Disclaimer and Signature  |
| I certify that my answers are true and complete to the best of my knowledge.  |
| If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. |
| Signature: Date:  |
|   |
|   |
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Updated: 6/7/2018