

Providence Classical School

6000 Spring Cypress Road ~ Spring, Texas 77379 ~ 281-320-0500 ~ 281-379-3050 ~ Fax: 281-379-2039 ~ www.pcsclassical.org

APPLICATION FOR EMPLOYMENT

REV. 03/03

<i>CHECK ONE</i>	<input type="checkbox"/> NEW APPLICANT	<input type="checkbox"/> FORMER APPLICANT	<input type="checkbox"/> FORMER EMPLOYEE	DATES:	
<i>CHECK ALL APPLICABLE</i>		<input type="checkbox"/> LICENSED	<input type="checkbox"/> NON-LICENSED	<input type="checkbox"/> SUBSTITUTE	<input type="checkbox"/> ADMINISTRATIVE
TYPE OF LICENSE(S):					

GENERAL AREAS OF INTEREST			
<input type="checkbox"/> EARLY GRAMMAR (K-1) TEACHER	<input type="checkbox"/> ACCOUNTING/FINANCE	<input type="checkbox"/> SECRETARIAL/CLERICAL STAFF	<input type="checkbox"/> MEDIA/LIBRARY
<input type="checkbox"/> GRAMMAR (2-6) TEACHER	<input type="checkbox"/> INFORMATION SYSTEMS/DBA	<input type="checkbox"/> TEACHER ASSISTANT/AIDE	<input type="checkbox"/> ART/MUSIC/DRAMA TEACHER
<input type="checkbox"/> MIDDLE (7-8) TEACHER	<input type="checkbox"/> SCHOOL ADMINISTRATION	<input type="checkbox"/> HOUSEKEEPING	<input type="checkbox"/> COUNSELING
<input type="checkbox"/> HIGH SCHOOL (9-12) TEACHER	<input type="checkbox"/> ADMISSIONS/PUBLIC RELATIONS	<input type="checkbox"/> OTHER (SPECIFY):	

DATE AVAILABLE:	MINIMUM WAGE/SALARY DESIRED:
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PLEASE PRINT LEGIBLY IN INK OR TYPE

PLEASE BE SURE TO COMPLETE ALL SECTIONS. IF NOT APPLICABLE, MARK "N/A".

ANY INCOMPLETE INFORMATION MAY BE CONSIDERED WILLFUL OMISSION AND RESULT IN YOUR APPLICATION NOT BEING CONSIDERED.

PERSONAL INFORMATION	
NAME (LAST, FIRST, MIDDLE INITIAL):	E-MAIL ADDRESS:
ADDRESS (NUMBER, STREET, CITY, STATE, ZIP):	
PHONE NUMBERS (W/AREA CODE): HOME: () - MOBILE: () -	PREVIOUS NAMES UNDER WHICH YOU HAVE WORKED OR ATTENDED SCHOOL
IF OFFERED EMPLOYMENT, CAN YOU PROVIDE PROOF THAT YOU ARE AT LEAST 18 YEARS OLD? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES AND CAN YOU PROVIDE DOCUMENTATION TO THIS EFFECT? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF PRESENTLY EMPLOYED, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO, EXPLANATION ON REVERSE	IN CASE OF EMERGENCY, WHOM SHOULD WE CONTACT? NAME: PHONE: () -

GENERAL INFORMATION					
<p>HAVE YOU EVER BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC OFFENSE, INCLUDING SPEEDING OR PARKING VIOLATIONS)? "CONVICTED" MEANS YOU WERE DECLARED GUILTY BY A JUDGE OR JURY OR YOU PLED GUILTY IN COURT. A CONVICTION MAY HAVE TAKEN PLACE EVEN IF YOU DID NOT PAY A FINE OR SPEND TIME IN PRISON. ANSWERING YES TO THIS QUESTION WILL NOT AUTOMATICALLY DISQUALIFY YOU FROM EMPLOYMENT. PROVIDENCE CLASSICAL SCHOOL RESERVES THE RIGHT TO MAKE A CRIMINAL BACKGROUND CHECK.</p> <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN. _____ _____ _____					
DO YOU HAVE RELATIVES EMPLOYED BY PROVIDENCE CLASSICAL SCHOOL? <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, PROVIDE NAMES(S), RELATIONSHIP(S), AND ASSIGNMENT(S)		
WORK PREFERENCE:	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME	<input type="checkbox"/> SUBSTITUTE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> VOLUNTEER
HAVE YOU EVER BEEN DISCIPLINED, DISCHARGED (TERMINATED), OR ASKED TO RESIGN BY A FORMER EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN. _____ _____ _____					
DO YOU ANTICIPATE A PROBLEM WITH PROVIDING A LONG-TERM COMMITMENT OF EMPLOYMENT WITH US SHOULD AN OFFER BE GIVEN TO YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN. _____ _____ _____					

EMPLOYMENT HISTORY (ALL INFORMATION MUST BE COMPLETE EVEN IF RESUME IS INCLUDED.)
 PLEASE BEGIN WITH YOUR PRESENT AND MOST RECENT EMPLOYER. ACCOUNT FOR ANY PERIODS OF UNEMPLOYMENT. ATTACH ADDITIONAL SHEETS IF NECESSARY

COMPANY	JOB TITLE		
STREET ADDRESS	CITY	STATE	ZIP CODE
TELEPHONE NUMBER () - FAX NUMBER () -	DATES EMPLOYED FROM:		To:
DESCRIPTION OF DUTIES:			
SUPERVISOR'S NAME (FIRST) (LAST)		DEPARTMENT	
DID YOU HAVE A DIFFERENT NAME WHILE WORKING HERE: IF SO, PLEASE LIST:		REASON FOR LEAVING	

COMPANY	JOB TITLE		
STREET ADDRESS:	CITY	STATE	ZIP CODE
TELEPHONE NUMBER: () - FAX NUMBER: () -	DATES EMPLOYED FROM:		To:
DESCRIPTION OF DUTIES:			
SUPERVISOR'S NAME (FIRST) (LAST)		DEPARTMENT	
DID YOU HAVE A DIFFERENT NAME WHILE WORKING HERE: IF SO, PLEASE LIST:		REASON FOR LEAVING	

COMPANY	JOB TITLE		
STREET ADDRESS	CITY	STATE	ZIP CODE
TELEPHONE NUMBER: () - FAX NUMBER: () -	DATES EMPLOYED FROM:		To:
DESCRIPTION OF DUTIES:			
SUPERVISOR'S NAME (FIRST) (LAST)		DEPARTMENT	
DID YOU HAVE A DIFFERENT NAME WHILE WORKING HERE: IF SO, PLEASE LIST:		REASON FOR LEAVING	

COMPLETE THIS SECTION IF APPLYING FOR TEACHING POSITION

STUDENT TEACHING (IF COMPLETED) WITHIN THE PAST THREE YEARS): SOCIAL WORKERS AND COUNSELORS LIST PRACTICUM, FIELD EXPERIENCE, AND INTERNSHIP(S).

SCHOOL CORPORATION AND LOCATION	DATES:		SUBJECT OR GRADE	SUPERVISING TEACHER'S NAME AND PHONE NUMBER W/ AREA CODE
	FROM	TO		

PROVIDENCE CLASSICAL SCHOOL

EDUCATION

DEGREES / DIPLOMAS HELD	TYPE OF SCHOOL	NAME AND LOCATION OF SCHOOL	DATES: FROM- TO	MAJOR FIELD	SEMESTER HOURS	GPA (MAJOR)	MINOR FIELD	SEMESTER HOURS	GPA (MINOR)
	COLLEGE* OR UNIVERSITY								
	COLLEGE* OR UNIVERSITY								
	COLLEGE* OR UNIVERSITY								

*INCLUDES BUSINESS, TRADE OR CORRESPONDENCE SCHOOLS.

LICENSE RECORD

LIST SUBJECTS/GRADES YOU ARE QUALIFIED TO TEACH IN ORDER OF PREFERENCE. IF YOU NEED ADDITIONAL SPACE PLEASE ATTACH AN ADDITIONAL PAGE.

LICENSE/REGISTRATION/CERTIFICATION TYPE	STATE	DATE EXPIRES	SERIAL NUMBER	GRADE LEVEL/SUBJECT

SKILL INFORMATION

FOR JOBS REQUIRING OFFICE MACHINE SKILLS
DO YOU TYPE: YES NO SPEED _____ WPM

FOR JOBS REQUIRING DRIVING
DO YOU HAVE A VALID CURRENT DRIVERS LICENSE? YES NO
STATE _____ OPERATOR'S NUMBER _____
CDL NUMBER _____

HOW WOULD YOU CHARACTERIZE YOUR COMPUTER SKILLS (CHECK ONE)? EXPERT INTERMEDIATE NOVICE NONE

PLEASE INDICATE THE SKILLS OR DUTIES WHICH APPLY TO YOUR WORK EXPERIENCE/BACKGROUND:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> MAIL MERGE/MASS MAILING | <input type="checkbox"/> ACCOUNTING | <input type="checkbox"/> DECISION MAKING | <input type="checkbox"/> MS-EXCEL |
| <input type="checkbox"/> INTERIOR DESIGN | <input type="checkbox"/> ACCOUNTS RECEIVABLE | <input type="checkbox"/> ANALYTICAL ABILITY | <input type="checkbox"/> MS-WINDOWS |
| <input type="checkbox"/> PUBLIC SPEAKING | <input type="checkbox"/> ACCOUNTS PAYABLE | <input type="checkbox"/> DETAIL MINDED | <input type="checkbox"/> MS-ACCESS |
| <input type="checkbox"/> DATA ENTRY | <input type="checkbox"/> PAYROLL | <input type="checkbox"/> CALCULATOR | <input type="checkbox"/> MS-POWER POINT |
| <input type="checkbox"/> PHONE SKILLS | <input type="checkbox"/> RECORD KEEPING | <input type="checkbox"/> SALES | <input type="checkbox"/> MS-WORD |
| <input type="checkbox"/> FILING | <input type="checkbox"/> PROJECT MANAGEMENT | <input type="checkbox"/> FOREIGN LANGUAGES | <input type="checkbox"/> MS-PUBLISHER |
| <input type="checkbox"/> SECRETARIAL | <input type="checkbox"/> LEADERSHIP | _____ | <input type="checkbox"/> QUICKEN QUICKBOOKS |
| <input type="checkbox"/> HIGH MATH APTITUDE | <input type="checkbox"/> ORAL COMMUNICATION | _____ | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> CUSTOMER SERVICE | <input type="checkbox"/> WRITTEN COMMUNICATION | _____ | _____ |
| <input type="checkbox"/> BOOKKEEPING | <input type="checkbox"/> PROBLEM SOLVING | <input type="checkbox"/> MUSICAL INSTRUMENT | _____ |

PLEASE CHECK ANY OF THE FOLLOWING SPECIAL AREAS IN WHICH YOU HAVE EXPERIENCE AND ARE WILLING TO TEACH AT PROVIDENCE CLASSICAL SCHOOL

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> PHYSICAL EDUCATION | <input type="checkbox"/> MUSIC | <input type="checkbox"/> JOURNALISM | <input type="checkbox"/> COMPUTER PROGRAMMING |
| <input type="checkbox"/> SPORT COACHING: _____ | <input type="checkbox"/> ENSEMBLE | <input type="checkbox"/> RHETORIC, DEBATE | <input type="checkbox"/> MATH |
| <input type="checkbox"/> ART | <input type="checkbox"/> DRAMA, DRAMATIC READING | <input type="checkbox"/> LOGIC | <input type="checkbox"/> SCIENCE, NATURE STUDIES |

BRIEFLY DESCRIBE THE EXPERIENCE YOU HAVE IN ANY OF THE ABOVE SPECIAL AREAS.

SECOND CAREER TEACHING APPLICANTS

IF YOU DO NOT HAVE A DEGREE IN TEACHING PLEASE DESCRIBE IN DETAIL ON A SEPARATE SHEET OF PAPER WHAT EXPERIENCES OR ADDITIONAL CREDIT HOURS, POST HIGH SCHOOL, THAT YOU HAVE ACQUIRED THAT ATTRIBUTE TO YOUR QUALIFICATIONS TO TEACH STUDENTS. PLEASE LIST THE NAMES OF THE INSTITUTIONS YOU WERE WITH AND THE DATES RELATED TO YOUR EXPERIENCES. INCLUDE ANY TRAVEL THAT MAY HAVE CONTRIBUTED TO YOUR EDUCATIONAL ADVANTAGE.