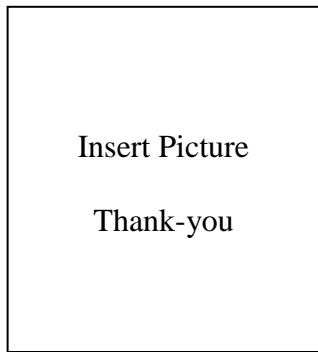


Fort Myers Christian School
1550 Colonial Blvd.
Fort Myers, Fl 33907
239-939-4642
www.fmcs-fl.org



SUPPORT STAFF

Your interest in Fort Myers Christian School is appreciated. We invite you to fill out this initial application and return it to our school office. If an opening occurs for which you may qualify, we will notify and ask you to send your placement file to our office. We will also contact your references. If we have continued interest in your candidacy, we may send you some follow up questions and arrange for a personal interview.

We realize that the key to a successful Christian School is its staff. We are seeking applicants who are professionally qualified, who really love children, and who, by the pattern of their lives, are Christian role models. Luke 6:40.

We look forward to receiving your initial application. Thank you for your interest in the ministry of our school. It is our prayer that God will fulfill His perfect will in the lives of all applicants.

A. APPLICANT'S NAME AND ADDRESS

Full name: _____

Application date: _____/_____/_____ Date available: _____/_____/_____

Present address: _____

Phone: Days (_____) _____ Evenings (_____) _____

Best time to call you? _____ Length of time at this address? _____

Email address (please print clearly) _____

POSITION YOU ARE APPLYING FOR:

How did you learn about the position for which you are applying?

What skills do you have that qualify you for this position?

C. CHRISTIAN BACKGROUND

*** On separate paper, briefly give your Christian testimony – handwritten or typed.**

Do you believe the Bible to be the ONLY inspired and infallible Word of God, our final authority in all matters of faith, truth and conduct? Yes ___ No ___

Name of your church _____

Are you presently a member in good standing? _____ Years? _____

Name of your Pastor _____

In what church activities are you involved and with what degree of regularity?

What other Christian service have you done since becoming a Christian? (Outside of your church)

To what extent do you believe you should become involved in Sunday and other weekday ministries of the sponsoring church or the church of which you are a member?

Describe your routine of personal Bible study and prayer.

D. PROFESSIONAL QUALIFICATIONS

*** Please attach photocopies of all your postsecondary transcripts. Should you be offered a position, official copies of your transcripts must be provided to the school for inclusion in your personnel file.**

What degree or degrees do you hold?

Degree	Date Received	Issuing Institution
<hr/>		
<hr/>		

Your Major(s) _____

Your Minor(s) _____

E. PERSONAL PHILOSOPHY

A. Why do you wish to work in a Christian school?

B. What are the main characteristics that distinguish a Christian school from a public school?

C. What areas do you feel are your strengths? Weaknesses?

F. EMPLOYMENT HISTORY

Please start with your current or most recent employer and work backwards for the past ten years. If necessary, you may follow the same format on the reverse.

1. Position _____ Dates of Employment _____
Address _____

Supervisor's Name and Phone Number _____
Reason for leaving _____

2. Position _____ Dates of Employment _____
Address _____

Supervisor's Name and Phone Number _____
Reason for leaving _____

3. Position _____ Dates of Employment _____
Address _____

Supervisor's Name and Phone Number _____
Reason for leaving _____

Have you worked under a different name for any of the employers you have listed? If so, what was the name or names?

Have you served in the military? Yes ___ No ___. If yes, what type of training or education did you receive?

G. PERSONAL REFERENCES

Give three references who are qualified to speak of your spiritual background, educational experience and a personal reference. Do not list family members or relatives for references.

Spiritual Reference:

Name _____

Position: _____

Complete Address: _____

Phone: _____

Educational reference:

Name _____

Position: _____

Complete Address: _____

Phone: _____

Personal reference:

Name _____

Position: _____

Complete Address: _____

Phone: _____

H. APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that Fort Myers Christian School (FMCS) does not discriminate in its employment practices against any person because of race, color, national or ethnic origin, gender, age, or qualified disability.

I hereby certify that the facts set forth in this application process are true and complete to the best of my knowledge. I understand that falsification of any statement or a significant omission of fact may prevent me from being hired, or if hired, may subject me to immediate dismissal regardless of the time elapsed before discovery. If I am released under these circumstances, I further understand and agree that I will be paid and receive benefits only through the day of release.

I authorize Fort Myers Christian School to thoroughly interview the primary references which I have listed, any secondary references mentioned through interviews with primary references, or other individuals who 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 other matters related to my suitability for the position.

I authorize references and my former employers to disclose FMCS any and all employment records, performance reviews, letters, reports, and other information related to my life and employment, without giving me prior notice of such disclosure. In addition, I hereby release FMCS, 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 FMCS.

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 an investigation. I authorize FMCS to conduct a criminal records check. I understand and agree that any offer of employment that I may receive from FMCS is conditioned upon the receipt of background information, including criminal background information. FMCS may refuse employment or terminate conditional employment if FMCS deems any background information unfavorable or that it could reflect adversely on FMCS or on me as a Christian role model.

I understand that this is only an application for employment and that no employment contract is being offered.

I certify that I have carefully read and do understand the above statements.

Signature of Applicant

Date

REQUEST FOR RECORDS CHECK AND AUTHORIZATION

I hereby request the _____ Police Department to release any information which pertains to any record of convictions contained in its files. I hereby release said Police Department from any and all liability resulting from such disclosure.

Signature

Print Full Name (first, middle, last)

Date of Birth

Driver's License Number

Today's Date

Record Check Received From:

Name: _____

Address: _____

Date: _____

Results: _____ All Clear _____ Problem

Comments: _____

Verified by: _____