Position Desired _____ Date of Application _____

APPLICATION FOR EMPLOYMENT

Northland Christian School
4363 Sylvanfield
Houston, TX 77014-1620
(281) 440-1060, Fax (281) 440-7572
www.northlandchristian.org

PERSONAL DATA

Name: _____ SSN: ____ - ____ - ____
(Last) (First) (Middle)

Street Address: _____ City: _____ State: ____ Zip: _____

Male ◯ Female ◯ Race (Optional): _____ Telephone: ( ) _____

Place of Birth: _____ _____ Date of Birth: _____
(City) (State) (Month/Day)

Church Affiliation: _____ Congregation: _____

Grade/Subject you prefer to teach: _____
(1st Choice)

_____
(2nd Choice)

Are you a certified teacher: Yes ◯ No ◯ _____
(State(s) of Certification)

CERTIFICATION INFORMATION

STATE OF CERTIFICATION	CERTIFICATE TYPE	CERTIFICATE NUMBER	AREA(S) OF CERTIFICATION	
			1)	2)
			3)	4)
			1)	2)
			3)	4)

RECORD OF TEACHING EXPERIENCE

SCHOOL DISTRICT	SCHOOL	GRADE(S) TAUGHT	# YEAR(S) TAUGHT
TOTAL YEARS TAUGHT			

COLLEGES OR UNIVERSITIES ATTENDED

COLLEGE OR UNIVERSITY	YEARS ATTENDED	DEGREE EARNED

WORK EXPERIENCE OTHER THAN TEACHING

EMPLOYER	OCCUPATION	LOCATION/ CITY	DATES EMPLOYED

CO-CURRICULAR ACTIVITY EXPERIENCE (or Interest)

ACTIVITY/SPORT	DESCRIPTION OF YOUR INVOLVEMENT	# YEARS INVOLVED

PROFESSIONAL REFERENCES

NAME	WORK TELEPHONE	HOME TELEPHONE	RELATIONSHIP

STATEMENT OF INTENT

Briefly describe why you are seeking employment at Northland Christian School. **This statement must be made in your own handwriting.**

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

APPLICANT'S CERTIFICATION

Northland Christian School was founded on *Christian principles* and is operated by Christian staff members. I understand that, if hired, I will be expected to exemplify Jesus Christ in all that I do and say. I agree to support and follow **all policies** of the board and administration, and understand that failure to do so will result in disciplinary action. Furthermore, I understand that all employees new to the NCS system are hired on **probation** for a period of one calendar year and must submit to a **Criminal Background check** before employment is finalized. By my signature hereon, I certify that I understand these policies and that all information provided on this application is true and correct to the best of my knowledge. I further understand that willful misrepresentation of any information provided hereon is cause for immediate dismissal.

Applicant's Signature _____ **Date** _____

ATTACHMENT AND TRANSMITTAL INSTRUCTIONS

Please return this completed application to the **Head of School's Office** accompanied by the following attachments:

- ◯ A **transcript** from each institution attended
- ◯ College or university **placement folder** (beginning teachers only)
- ◯ A copy of your **teaching certificate(s)**
- ◯ A copy of **your Social Security Card** and **Driver's License**
- ◯ A recent **picture** for identification
- ◯ _____

Northland Christian School does not discriminate on the basis of race, color, national or ethnic origin regarding its policies, scholarship programs, educational offerings, athletic programs, or other school-sponsored activities.

Employment Background Check Form

4363 Sylvanfield
Houston, TX 77014-1620
281-440-1060 ext. 6420
Fax: 281-440-7572

CONSENT TO PERFORM INVESTIGATIVE CONSUMER REPORT IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)

Last Name | First Name | Middle Name or Initial

Maiden or other name(s) used in any and all other records of birth or records of residence.

* Address | Apartment or #

City | County | State | Zip

** Date of Birth | Social Security Number (- -) | **Gender | **Race

***AS SHOWN ON THE ORIGINAL APPLICATION**
****TO BE USED FOR CRIMINAL HISTORY CHECKS ONLY AND NOT A PART OF THE PERSONNEL FILE.**

In connection with my application for employment, my continued employment, or in connection with my desire to engage in volunteer activities, I have been advised and I hereby consent and authorize the Employer and its agent, at any time during or subsequent to my application process, to conduct an investigative consumer report that may include, but are not limited to, a criminal record check, employment and education verifications, personal references; personal interviews; my personal credit history; and driving record. I do hereby consent to Employer's use of any information provided on this form or during the application process in performing the investigative consumer report. Employer has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment. I agree to release, indemnify and hold harmless Employer and any reporting agency Employer uses with regard to any information reported by the reporting agency. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained from a consumer reporting agency. If so, I will be notified and given the name, address, and phone number of the agency which provided the information. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of Employer. Under the Fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information. I acknowledge that facsimile, copy or email shall be as valid as the original.

The following are my responses to questions about my criminal history (if any).

1. ____YES ____NO Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors).
If yes, please provide details below.

State: | County: | Date of Offense: / /

Details of conviction:

Employment Background Check Form

2. ____YES ____NO Have you ever-received deferred adjudication or similar disposition for any federal, state or municipal offense? If yes, please provide details below.

State: County: Date of Offense:

Details of offense:

3. ____YES ____NO Have you ever-received probation or community supervision for any federal, state or municipal offense? If yes, please provide details below.

State: County: Date of Offense:

Details of supervision:

4. ____YES ____NO Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If yes, please provide details below.

Country: City: Date of Offense:

Details of conviction:

5. ____YES ____NO As of the date of this consent form, do you have any pending charges against you? If yes, please provide details below.

State: County: Date of Arrest

Details of pending charges:

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

CITY/TOWN	COUNTY	STATE

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE, I UNDERSTAND THAT GROUNDS FOR CANCELING OF ANY AND ALL OFFERS OF EMPLOYMENT WILL EXIST AND MAY BE USED AT THE DISCRETION OF THE EMPLOYER.
Signed this _____day of_____, _____.

APPLICANT (PRINT NAME)_____

APPLICANT'S SIGNATURE_____