



# CHRISTIAN ACADEMY

*A Mind for Truth and a Heart for God*

## GENERAL EMPLOYMENT APPLICATION

Each question should be answered as completely as possible. All information will be held in confidence.

Date: \_\_\_\_\_ Grade Preference: \_\_\_\_\_ Subject Preference: \_\_\_\_\_

Expected Annual Salary Range \_\_\_\_\_

### A. PERSONAL

1. Full Name: \_\_\_\_\_ Contact No(s): \_\_\_\_\_  
Last                      First                      Middle
2. Address: \_\_\_\_\_
3. Name of relatives and/or friends working at First Assembly of God or Christian Academy? \_\_\_\_\_

### B. POSITION

1. Position applying for: \_\_\_\_\_
2. Minimum salary requirements: \_\_\_\_\_
3. Applying for:     Full-time     Part-time     Temporary     Summer
4. If the position applying for requires you to drive, do you own a car? \_\_\_\_\_ Do you have a valid driver's license? \_\_\_\_\_
5. Are you available to work overtime if required? \_\_\_\_\_
6. When are you available to start work? \_\_\_\_\_
7. Do you have a health problem that would inhibit or impair your ability to do the job for which you are applying? \_\_\_\_\_  
 If yes, explain: \_\_\_\_\_

### C. EDUCATION

NAME & LOCATION OF SCHOOL	DATES	DIPLOMA	DEGREE	MAJOR AND MINOR
High	From	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To			
Business or Trade	From	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To			
College	From	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To			
Graduate	From	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To			

U.S. Military Training	From	<input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Training		
	To				
Other Training	From	Language	Speak	Read	Write
	To				

D. OFFICE QUALIFICATIONS

Computer experience: <input type="checkbox"/> PC <input type="checkbox"/> Mac <input type="checkbox"/> MS Word <input type="checkbox"/> MS Excel <input type="checkbox"/> Power Point <input type="checkbox"/> Other _____ _____	Typing speed: _____
	What types of office equipment can you operate: <input type="checkbox"/> Facsimile machine <input type="checkbox"/> Scanner <input type="checkbox"/> Multi-line phone system <input type="checkbox"/> Network <input type="checkbox"/> Copier <input type="checkbox"/> 10-key <input type="checkbox"/> Other _____
Briefly describe your computer experience.	What other office skills do you have?

E. WORK EXPERIENCE

NAME OF COMPANY & SUPERVISOR	ADDRESS	POSITION	MO /YR		REASON FOR LEAVING
			FROM	TO	

F. SPIRITUAL PREPARATION (continue on a separate sheet if required)

- How long have you known Christ as your Lord and Savior? \_\_\_\_\_
- Do you believe the Bible to be the inspired and infallible Word of God, and the authority in all matters of faith and conduct? \_\_\_\_
- Describe the Baptism of the Holy Spirit? \_\_\_\_\_  
\_\_\_\_\_
- Briefly state your personal relationship with God. \_\_\_\_\_  
\_\_\_\_\_

5. If possible, please share your personal testimony of God's work in your life recently. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

6. Church Attendance:

Denomination \_\_\_\_\_ Church attending \_\_\_\_\_

Frequency of attendance \_\_\_\_\_ Member? Yes \_\_\_\_\_ No \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Phone \_\_\_\_\_

List any volunteer or ministry responsibilities you may have in your church \_\_\_\_\_

7. State briefly your attitude toward smoking, drinking, gambling, and immodest dress.

\_\_\_\_\_  
 \_\_\_\_\_

8. On what basis would you require obedience from the children with whom you come in contact?

\_\_\_\_\_  
 \_\_\_\_\_

9. Why do you wish to work at Christian Academy? \_\_\_\_\_  
 \_\_\_\_\_

10. References: List three references and addresses. Include at least one professional reference and your pastor. We will send evaluation questionnaires to those listed.

	REFERENCE NAME	ADDRESS	PHONE NO.
Professional			
Pastor			
Other			

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have not withheld anything that will affect this application unfavorably.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_



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## AUTHORIZATION TO RELEASE REFERENCE INFORMATION

I have made application for a position as a \_\_\_\_\_ with **Christian Academy**. I have authorized the school to thoroughly interview the primary references which I have listed, any secondary references mentioned through interviews with primary references, or other individuals that 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 all other matters related to my suitability for employment.

I authorize references and my former employers to disclose to the school 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 **Christian Academy**, 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 **Christian Academy**.

I agree that a photocopy or facsimile copy of this document and any signature shall be considered for all purposes as the original signed release on file.

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

\_\_\_\_\_  
Applicant's Name (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Social Security Number

Please return the completed application to:

Christian Academy  
3400 Moanalua Road  
Honolulu, HI 96819

(808)836-0233  
(808)836-4415 fax