



# TRADERS POINT CHRISTIAN ACADEMY

6600 South Indianapolis Road • Whitestown, IN 46075 • Phone: 317.769.2450 • Fax: 317.769.2456 • www.tpcs.org

**APPLICATION FOR SUBSTITUTE TEACHER POSITION**

*(Please print or type; you may also include a vita sheet)*

Date of application \_\_\_\_\_

Date available for employment \_\_\_\_\_

Check all/any Grades/Classes Preferred:

- Early Childhood
- Kindergarten to Fourth Grade
- Fifth Grade to Eighth Grade
- High School (9th-12th Grade)

- Art
- Music
- Physical Education

- Computer
- Spanish
- Library

## **PERSONAL INFORMATION**

Name \_\_\_\_\_

Present address \_\_\_\_\_

City \_\_\_\_\_ IN \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: Days \_\_\_\_\_ Evenings \_\_\_\_\_

Cell phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Current employment status \_\_\_\_\_

## **SPIRITUAL INFORMATION**

When did you make your decision for Christ? \_\_\_\_\_

Church affiliation \_\_\_\_\_ Member?  Yes  No

How long? \_\_\_\_\_ Pastor's name \_\_\_\_\_ Phone \_\_\_\_\_

How often do you attend worship services? \_\_\_\_\_

How are you involved in the ministry of this church? \_\_\_\_\_

Are you familiar with spiritual gifts? If so, please list your gifts.

Do you believe the Bible to be the only inspired and infallible Word of God?  Yes  No

Describe your view of the Bible and the impact that study of the Bible has had on your life: \_\_\_\_\_

**EDUCATIONAL & PROFESSIONAL EXPERIENCE**

(Please attach a photocopy of all college transcripts, an Indiana Teacher's License, and/or a Substitute Teacher's License, if applicable.)

**Educational Experience**

Level	Name/Location of School	Major	Degree	Dates
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Secondary \_\_\_\_\_

College \_\_\_\_\_

Graduate \_\_\_\_\_

Other (include special training) \_\_\_\_\_

Number of continuing education units after undergraduate school \_\_\_\_\_

Cumulative Grade Point: Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_

Specialization:  Early Childhood     Kindergarten     Elementary     Secondary

Special Honors received during your schooling:

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

**Certification (if applicable)**

Type	Issued	Expires	State	Number
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\_\_\_\_\_  
\_\_\_\_\_

Endorsements: \_\_\_\_\_

\_\_\_\_\_

**Teaching/Work Experience** (Begin with most recent position.)

Grade/Subject	School/Organization	Principal/Supervisor	Dates

Total number of years of teaching experience: Public \_\_\_\_\_ Private \_\_\_\_\_

Have you ever been dismissed or asked to resign from any position? If yes, explain what happened:

\_\_\_\_\_

\_\_\_\_\_

**PERSONAL PHILOSOPHY**

On separate pages please label and succinctly answer each of the questions below in one or two paragraphs:

1. Write your personal Christian testimony.
2. Describe your style and approach to teaching in the classroom.
3. Describe your philosophy and practice of discipline.
4. Describe your strengths and weakness as a teacher.

**REFERENCES**

You must sign the attached *Reference Release Form* and return it with this application. Please do not list family members or relatives as references. There is a minimum of one reference per category, although more are preferred.

Name	Complete Address	Email Address Needed	Phone	Position/Relationship
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Professional (someone who has worked with you in teaching, including one supervisor):

1. \_\_\_\_\_
2. \_\_\_\_\_

Friend (someone who has known you for a number of years):

1. \_\_\_\_\_
2. \_\_\_\_\_



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## APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that Traders Point Christian Academy is a Christian school whose purpose is to teach and practice Christian truth as found in the Scriptures in the context of the classroom.

I understand that Traders Point Christian Academy does not discriminate in its employment practices against any person because of gender, race, national or ethnic origin, or handicap. I further understand that any offer of employment is conditioned on the proof of legal authority to work in the United States.

I hereby certify that the facts set forth in this initial application are true and complete to the best of my knowledge. I understand that discovery of falsification of any statement or significant omission of fact during any phase of the hiring process may prevent me from being hired or, if hired, may subject me to immediate dismissal.

I understand that an investigative report including information concerning my character, employment history, general reputation, personal characteristics, policy record, education, qualifications, motor vehicle record, and/or mode of living may be obtained in connection with my application for and/or continued employment with Traders Point Christian Academy. Before adverse action is taken, based in whole or in part of the information contained in the consumer report, I will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of my rights under the Fair Credit Reporting act, as well as additional information on my rights under the law.

By signing below, I voluntarily authorize Traders Point Christian Academy to inquire about my personal history, to perform an investigative report, and to verify all data given in my application for employment, related papers and my oral interviews. I authorize the release and giving of any performance reviews and personal references. I release any person, organization or company from liability or damage which may result from furnishing the information requested, providing that it is done in good faith and without malice. I further waive the right to ever personally view any references given to Traders Point Christian Academy.

I further certify that I have carefully read and do understand the above statements along with the statements of mission, values and faith.

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*Applicant's Signature*

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*Date of Signature*



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## AUTHORIZATION TO RELEASE REFERENCE & BACKGROUND CHECK INFORMATION

I have made application for a position with Traders Point Christian Academy. I authorize Traders Point Christian Academy to inquire about my personal history, to perform an investigative report, and to verify all data given in my application for employment, related papers and my oral interviews.

I authorize the release and giving of any information requested by Traders Point Christian Academy such as employment records, performance reviews and personal references whether such information is favorable or unfavorable to me.

I release any person, organization or company from any and all liability, claims or damages that may directly or indirectly result from the use, disclosure or release of any such information by any person or party, whether such information is favorable or unfavorable to me, providing that it is done in good faith and without malice.

I further waive the right to ever personally view any references given to Traders Point Christian Academy.

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

\_\_\_\_\_

*Applicant's Name (printed)*

\_\_\_\_\_

*Applicant's Signature*

\_\_\_\_\_

*Applicant's Social Security Number*

\_\_\_\_\_

*Date of Birth (MM/DD/YYYY)*

\_\_\_\_\_

*Current County of Residence ex. Boone, Hamilton, Hendricks*

\_\_\_\_\_

*Date of Signature*