

Office Use Only

Date rec'd. _____

Action taken _____



STAFF APPLICATION

Application Date _____ Position/Grade Interest _____

Name: Miss () Mrs. () Mr. () Dr. ()

Last First M.I.

Present Address _____
Street

City Zip code Length of time at this address ____

Email Address _____

Home Phone _____ Cell Phone _____

PERSONAL DATA

Date of Birth: ___/___/___ Marital Status: Single Married Divorced Separated Widow(er)

Number of children: _____ Ages: _____

List special skills (musical instruments, hobbies, etc.):

Are you legally eligible for employment in the United States? Yes No

CHRISTIAN BACKGROUND

Please briefly give your testimony.

PROFESSIONAL PREPARATION

Please list degree or degrees you currently hold starting with the most recent.

Degree Issuing Institution & Date Granted: _____

Your major(s) & minor (s)

Please describe any further training/ conferences in which you have participated.

EMPLOYMENT HISTORY

Please start with your current or most recent employer.

1.Position _____

Dates of Employment & Reason for leaving _____

Name and Address

Supervisor’s Name & Phone Number _____

2.Position _____

Dates of Employment & Reason for leaving _____

Name and Address

Supervisor's Name & Phone Number _____

3.Position _____

Dates of Employment & Reason for leaving _____

Name and Address

Supervisor's Name & Phone Number _____

4.Position _____

Dates of Employment & Reason for leaving _____

Name and Address

Supervisor's Name & Phone Number _____

PERSONAL PHILOSOPHY

In a few sentences, succinctly answer each of the questions below.

Why do you wish to have a part in Arrows Academy?

What do you feel are your strengths? Weaknesses?

